M. Bowler MA

112 B



Borough of Middleton

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REPORT

ON THE

HEALTH OF THE BOROUGH

FOR

THE YEAR 1936
(JANUARY 1st TO DECEMBER 31st)

1/2

S. T. BEGGS, M.D., B.S., D.P.H.

Medical Officer of Health. Medical Officer to the Education Committee. Medical Officer to Maternity and Child Welfare Service.



MIDDLETON HEALTH CENTRE









THE COST OF THE PUBLIC HEALTH SERVICES

Nature of Service.		paye £8 I (Re (Re Pr	er occupy Rateable Value. presents ottage operty.)	ving a £15 V (Rej Alk Ho	presents rington ouses.)
Notification & Prevention o fectious Disease		s.	d. 6.04		11.32
Refuse Removal & Disposal		5	5.16	10	2.16
Ambulances			6.06		11.36
Food & Drugs (including I and Milk)			0.43		0.81
Housing (Pre-War & Post-V	Var)	4	4.22	8	1.91
Hospital Services	• • •		11.56	1	9.67
School Medical Services	• • •	1	8.66	3	2.73
Maternity & Child Welfar	e	1	1.30	2	0.95
Public Conveniences	• • •		11.49	I	9.54
Administration (of Health Sanitary Departments) inding Diseases of Animals &c	clud- Act,	2	1.38	3	11.60
County Services (Tubercul &c		6	11.44	13	0.45
		24	7.74	46	2.50

(These figures are based on the approximate actual expenditure for 1936-1937.)



Borough of Middleton

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MEMBERS OF THE COUNCIL

The

Mr. THOMAS JOHNSON HILTON, J.P., Mayor.

Aldermen:

*Mr. GEORGE BERRY, J.P.

†*Mr. THOMAS JOHNSON HILTON, J.P.

†*Mr. ARTHUR JAMES SMETHURST, J.P.

Mr. ALBERT HILTON, O.B.E., J.P.

Mr. RALPH GRUNDY, J.P.

Mr. FRANK HILTON, J.P.

Councillors:

Dr. WILLIAM CLEGG-NEWTON, J.P.

Mr. THOMAS HALSALL.

†*Mrs. CAROLINE FLETCHER, J.P.

†*Mr. FRED DAWSON.

Mr. HERBERT LEVER HOLDEN.

*Mr. WILLIAM HERBERT BOOTH, J.P.

*Mr. JAMES LOUIS GRADWELL.

†*Mr. ALBERT WOLSTENCROFT.

†Mr. HERBERT NORCROSS.

†*Mrs. CHARLOTTE REDFERN.

†Mr. JOHN FRANCIS COUZINS.

*Mr. FRED LORD KAY, J.P.

†*Mr. EDMUND BUTTERWORTH, J.P.

*Mr. THOMAS HEYWOOD.

Mr. THOMAS PARTINGTON, J.P.

*Mr. HARRY PARKES.

Mr. RICHARD ALDERSON.

*Mr. JOSEPH COCKSHOTT, J.P.

† Health Committee Chairman: Councillor A. WOLSTENCROFT.

* Education Committee Chairman: Councillor J. L. GRADWELL,

PUBLIC HEALTH STAFF.

Qualification. Diplomas. Certificates. Offices held. M.D., M.B., B.S., Medical Officer of *S. T. Beggs B.A.O., D.P.H. Health. Medical Officer to the Education Committee. M.O. to the M. & C. Welfare. Ophthalmic Surgeon M.D., B.Ch. P. A. Harry O.B.E., M.D., C.M., Consultant Ante-G. Fitzgerald F.C.O.G., L.M. Natal Clinic. R.C.P. (Edin.), L.R.C.P.I. L.D.S. A. E. Butler Dental Surgeon. M.R.C.V.S. G. H. Locke Veterinary Surgeon *T. Turner R.S.I. Examination. Chief Sanitary Inspector.† R.S.I. Examination. Additional Sanitary *S. Hacking Inspector. Health Visitor and *L. Green Trained Hospital Nurse. School Nurse. *A. E. Anson Trained Hospital Health Visitor and Nurse. School Nurse. Certificate Midwives' Board. Trained Hospital *E. M. Harrison Health Visitor and Nurse. School Nurse. Certificate Midwives' Board. Health Visitors Certificate. R. Barnes F.R.C.S. Orthopædic Surgeon

PUBLIC HEALTH STAFF.—Continued.

Nurse.

E. G. Lee Registered member Orthopædic of Chartered Society of Massage and Medical Gymnastics.

Registered member Orthopædic Nurse. D. J. MacGill of Chartered Society of Massage and Medical Gymnastics.

> E. M. Howarth ... Chief Clerk. M. Hodson Clerk. M. E. Davenport ... Clerk. P. Hibbert ... Clerk. E. Dean Clerk.

County Staff:

- G. Fletcher, M.D., M.R.C.P., D.P.H., Consultant T.B. Officer.
- M. A. Potter, Trained Nurse, T.B. Nurse.
 - * 50 per cent. grant towards salary made by the Ministry of Health, and whole time Officers, including the Clerks. The other Officers are part time.
 - † Food and Drugs Inspector.

 Inspector, Diseases of Animals Act.

To the Mayor, Aldermen and Councillors of the Borough.

Ladies and Gentlemen,

The Annual Report on the Health of the Borough for 1936 is drawn up in accordance with Circular 1561 (Ministry of Health) dated 16.10.36.

As specified in Appendix 1 to this Circular, the information is given under the following headings:—

Section 1. Statistics and Social conditions of the Area

Section 2. General Provision of Health Services.

Section 3. Sanitary Circumstances.

Section 4. Housing.

Section 5. Inspection and Supervision of Food.

Section 6. Prevalence of, and Control over Infectious and Other Diseases.

In addition are added—

Section 7. Maternity and Child Welfare Services.

Section 8. Medical Inspection of School Children.

I appreciate the interest and consideration given to my Reports and recommendations by the various Committees of the Council, and I thank all Committees, Officials and Members of my Staff for their friendly help and co-operation.

I am, Ladies and Gentlemen,

Yours faithfully,

S. T. BEGGS,

Medical Officer of Health

June, 1937.

SECTION I.



Area of the Borough: 5,170.19 Acres.

Wards: North, 1,839.5; Central, 140; South, 683; East, 567.62; Parkfield, 409; West, 1,531.07.

Persons per Acre (Census, 1931): North, 2.8; Central, 31.3; South, 9.0; East, 9.5; Parkfield, 11.1; West, 2.4.

Population. Census, 1931: 29,188

Estimated, 1936: 29,110

In adjustment of Boundaries, this area has been increased by 395.19 acres, as follows:—

			Gai	n—Acres	Loss—Acres
Royton		• • •			.50
Manchester				2.95	2.38
Chadderton		• • •		77.02	9.40
Bury R.DC.		• • •		327.50	
				407.47	12.28
NI . C	•			205 10	

Net Gain ... 395.19 acres

... 888.8

PHYSICAL FEATURES and General Character.

The Physical Features of the Area have been given in previous reports. The summary of the weather conditions for the year, as recorded at Observatory University, Manchester, shows that:

The	highest	temperature was on June 21st	86.10
The	lowest	temperature was on January	
	19th		19.00
The	total	number of hours of bright	

sunshine

The greatest amount during 24 hours 0.88 ,,

The mean amount of cloud (overcast—10) 6.4 ,,

18 days were classed as fine, 52 as fair, 175 as cloudy, and 121 as overcast.

Fog prevailed on 57 days.

Snow or sleet fell on 23 days. Hail fell on 4 days.

Lightning or thunder was recorded on 10 days.

The number of days on which the direction of wind was: N., 28; N.E., 35; E., 49; S.E., 46; S., 60; S.W., 57; W., 51; N.W., 40.

NUMBER OF INHABITED HOUSES, FAMILIES OR SEPARATE OCCUPIERS (Census, 1931).

INHABITED HOUSES.	Houses.	Total	7,821
(a) Ward. Inhabited	l. Males.	Females.	Total.
North Ward 1,400	2,423	2,676	5,099
South Ward 1,688	2,843	3,282	6,125
West Ward 991	1,704	1,939	3,643
Central Ward 1,171	2,052	2,335	4,387
East Ward 1,395	2,583	2,799	5,382
Parkfield Ward 1,176	2,170	2,382	4,552
Total 7,821	13,775	15,413	29,188
(b)	No. of	Rooms.	9 and
	3 4	5	6-8 over
1. No. of Families			
Family 8 46		9 1,802	912 69
., 2 —		3 9	9 1
2. No. of Persons 46 272	2,220 14,79	5 7,095 3	_

3. Increase in Occupied Dwellings during Census decade	
4. Increase in Duite E	10.01
4. Increase in Private Families	14.13
5. More than 2 persons per room 4.70 (1921) 2.96 (1	0211
6. Average size of Private Families	771)
of Private Families	3.63
7. Percentage Passage : D:	5.05
7. Percentage Persons in Private Houses	97.8
Hotels, etc	2.1
Vagrants, etc	0.1

RATEABLE VALUE AND SUM REPRESENTED BY 1d. RATE.

Rateable value of the Borough, 1st April, 1936.

ld. rate ... £540 (Estimated)

SOCIAL CONDITIONS, CHIEF OCCUPATIONS AND THEIR INFLUENCE ON PUBLIC HEALTH.

The Social Conditions are as stated in previous Reports.

The main conditions influencing public health during the year were Unemployment and Infectious Diseases.

CAUSES OF SICKNESS OR INVALIDITY.

£137,934

The more prevalent diseases during the year have been Chickenpox, Scarlet Fever, Measles, Whooping Cough, Pneumonia, Diphtheria.—See table on page 83.

OCCUPATIONS, MALE & FEMALE, Age 14 and over. (Registrar-General's Table 17, Census 1931)

Published in the Annual Report, 1932 (pages 10 to 13).

EFFECT OF OCCUPATION & ENVIRONMENT ON HEALTH.

There has been no particular incidence of Disease attributed to Occupation. The Economic condition due to Unemployment has been a factor during the year.

OCCUPATION AND MORTALITY.

			I	_abourers,	Other	
		Te	xtile	etc.	Occupa-	
		Wor	kers.	(unde-	tions,	
	Cause of Death,	(Mills	, etc	., fined,	as above.	
	Census 1931	37.95	5%)	4.69%)	(57.36%)	
	Heart	9		7	15	
	Tuberculosis	4		_	7	
	Pneumonia	2		_	4	
	Cancer	12		4	3	
0	Nephritis	5		2	5	
0 <i>66</i>	Suicide and Violen	ce l			3	
	Influenza	1		1		
	Cerebral Hæmorrha	ge 9		1	5	
	Bronchitis	5		1	6	
	Other Diseases	9		5	10	
	Total .	57		21	58	-
	Year, 1936.	41.9	1%	15.44%	42.65%	

UNEMPLOYMENT.

Monthly Average for Year 1936.

Wholly Unemployed and Non-Claimants.

	-9					al wholly
`					une	employed
Me	en.	Boys.	Wom	en.	Girls.	and
						non-
21 and	18-20	14-17	21 and	18-20	14-17	claimants
over.			over.			
889	27	2.8	329	14	31	1,318

Temporarily Suspended Claimants.

				Total to	em-			
Men.	Boys.	Women.		•	rarily Total			
21 0 10 20		10.20		- suspend				
		1 & 18-20) [4-[/	claimant	s Kegister			
over 553 31		ver. 181 17	9	802	2,120			
		STATIST	ICS					
Vital Statist					irth Rate.			
	Legitimate		208 3	203				
Live	llegitimate	0			143			
Births	otal	417	211	206	17.2			
į				j				
					Rate per			
				1,	000 Total			
					Births.			
Stillbirths	• • • • • •	. 14	8	6	32			
				D	Crude eath Rate.			
Deaths		. 422	209		14.4			
Deaths from								
child-birth:		s and acc	idents (or pregm	ancy and			
From	n Sepsis							
	-	Causes .			—			
Death-rate				age:—	-			
		r 1,000 liv			52			
Leg	itimate Inf	ants per	1,000 1	legitimate	live			
	births .		• • • • •	•••	53			
Illeg	gitimate In	fants per	1,000 il	legitimate	e live			
	births .				—			
Deaths from]			
Deaths from	_			*	• • •			
Deaths from	Diarrhœa	under 2	years of	age)	4			

											15												
(1)		is Death	Rate	from	Cancer.	1.67	1.54	1.88		+0.21	+0.34		Rate of Deaths	under one year	per 1,000	Live Births.	65	35	52		-13	117	
Death Rate	from	Tuberculosis	Jo	Respiratory	System.	0.54	0.75	0.58		+0.04	-0.17	lity Rate.	Per 1,000 I	Total	(Live and	Still Births).	7.82	10.12	Z.		-7.82	-10.12	.00.
			Crude	Death	Rate.	13.7	14.2	14.4*		+0.7	+0.2	Maternal Mortality Rate.			Per 1,000	Live Births.	8.26	10.81	Nil		-8.26	-10.81	1.07) = 15.4 per 1,000.
			Live	Birth	Rate.	13.2	12.7	14.3		- +	9.1+	Ma			_						1	Ī	
						:	:	:		:	:						:	:	:		:	:	ctor
						:	:	:		•	:						:	:	:		:	:	ty fa
							:	:		•	:						:	:	:		:	:	abili
							:	:	-u	935	:						:	:	:	n	335	:	mpar
						935	:	:	1936 on—	931-1935	:						335	:	:	1936 on-	931-1935	:	00)
						1-19				_	;						31-19	:	•		9, 19	:	ı-rate
						, 193	:	:	ease	5 years' average, 1	:						s, 193	:	:	ease	5 years' average, 1	:	death
						years	•		decr	rs'av	ar.						year	٠	٠	decr	rs' av	ar.	ısted
						of 5	1935	1936	se or	yea	us ye						of 5	1935	1936	se or	year	us ye	adju
						Mean of 5 years, 1931-1	Year 1935		Increase or decrease in	r)	Previous year						Mean of 5 years, 1931-1935	Year 1935		Increase or decrease in	5	Previous year	*1936 adjusted death-rate (comparability factor

Per 1,000 of Estimated Population.

COMPARATIVE STATISTICS.

							No.
	1930	1931	1932	1933	1934	1935	1936
Marriages	244	231	229	209	233	254	250
Births:							
Legitimate	414	375	400	360	392	362	411
lllegitimate	20	16	9	13	4	8	6
Deaths	337	439	377	412	364	413	422
Birth Rate	14.7	13.2	14.0	12.8	13.7	12.7	14.3
Death Rate	11.4	14.8	12.9	14.2	12.6	14.2	14.4
Infantile Deat	th						
Rate per 1,00	0						
Births	46	99	80	61	53	35	52
Diarrhœa Dea	ath						
Rate	0.03		0.06	0.03	0.14	0.03	0.13
Epidemic Dea	.th						
Rate	0.23	0.40	0.51	0.27	0.28	0.06	0.30
Phthisis Deat	:h						
Rate	0.61	0.54	0.51	0.55	0.38	0.75	0.58
Cancer Deat	:h						
Rate	1.59	1.69	1.47	1.89	1.76	1.54	1.88
		Pe	r 1,00	0 of 1		tion.	

				Death	Rate of
				Rate	Deaths
				from	under
			Tu	aberculosis	1 Year
				of	to
		Birth	Death 1	Respirator	y 1,000
Mean of 5 ye	ars:	Rate	Rate	System	Births
1895-1899		 26.1	18.3	1.35	179
1900-1904	4	 25.2	17.6	1.35	152
1905-1909	9	 22.2	16.0	1.42	144
1910-1914	4	 21.8	14.7	1.04	124
1915-1919	9	 14.9	15.3	1.15	88
1920-1924	4	 17.8	12.7	0.83	73
1925-1929	9	 14.3	13.6	0.59	74

]	Death Rate	Rate of Deaths
						from	under
						perculosis	
					1 (1)	of	to
				Birth	Death R	espirator	
Mean of	5 vea	ars:		Rate	Rate	System	Births
1926-1	•		• • •	14.5	13.0	0.61	65
1927-1			• • •	14.1	13.5	0.57	73
1928-1	932			14.1	13.4	0.59	76
1929-1	933	• • •		13.7	14.0	0.57	76
1930-1	934			13.6	13.1	0.51	67
1931-1	935			13.2	13.7	0.54	65
Year							
1924				15.2	12.6	0.65	54
1925		• • •		13.3	14.1	0.48	95
1926				15.3	12.6	0.74	57
1927				14.2	13.0	0.41	63
1928				14.6	11.2	0.65	63
1929		• • •		14.1	17.1	0.67	96
1930		• • •		14.7	11.4	0.61	46
1931				13.2	14.8	0.54	99
1932				14.0	12.9	0.51	80
1933				12.8	14.2	0.55	61
1934		• • •		13.7	12.6	0.38	53
1935				12.7	14.2	0.75	35
1936				14.3	14.4	0.58	52
POPULA [*]	TION	.—C	ensus,	1931–	- 29,188.		
			n.	lales.		Fema	lee
Singl	e			607		7,282	
Marr				572		6,730	
Ages 0-4				77		960	
5	0					993	
10.1	·9 ,,	•)25	• • •	99.	

1,009

____ 2,034

994

____ 1,987

10-14 ,,

			Male	8.		Female	
15-19	,,		1,172			1,190	
20-24	,,		1,186			1,395	
				2,358			2,585
25-49	,,		5,313			6,112	
50-74	,,		2,938			3,492	
75-95	and	over	155		• • •	277	
Increase in	Pop	ulation	(192	1-1931)		3.2%

Housing statistics are not taken into account in the

preparation of these estimates, because they are not available for all districts, and it is not possible, therefore, to ascertain whether the relation of the increase in dwellings in the district, to those of the whole country, support or oppose the inferences drawn from other sources."

The new houses built during the year allow of accommodation for 1,211 persons.

The population at midsummer, 1936, was 29,110. as stated by the Registrar-General.

BIRTHS.

NOTIFICATION OF BIRTHS (LOCAL).

Wards.	1930	1931	1932	1933	1934	1935	1936
North:							
Legitimate	83	66	69	61	85	60	88
Illegitimate	e l	_					2
Central:.							
Legitimate	62	36	49	42	33	49	37
Illegitimate	e 2	1					1
South:							
Legitimate	106	107	104	54	63	55	53
Illegitimate	e l	3		2	1		1

Words.	930	1931	1932	1933	1934	1935	1936
East:	0.0		0.0	5 0	4.0	4.4	- .
Legitimate Illegitimate	83	63	80	59 4	49	44	71
Parkfield:))		-7		1	'
Legitimate	53	45	29	61	47	34	46
Illegitimate	4	2	2	1	_	1	4
West:							
Legitimate	30	39	37	34	34	37	43
Illegitimate	1	3	2	2	_	1	
_	129	368	372	320	312	282	343
-							
Birth Rate for the	pas	t sever	n years	3:			
1930					1934	1935	1936
14.7	13	.2 1	4.0 1	2.8	13.7	12.7	14.3
DEATHS.							
Death rate for the	e pas	t seve	n years	3:			
1930	193	31 19	32 1	933	1934	1935	1936
11.4	14	.8 1	2.9 1	4.2	12.6	14.2	14.4
SEX INCIDENCE	•						
Males 171	20)7 1	97	205	179	204	209
Females 166	23	32 1	80	207	185	209	213
AGE INCIDENCE	2.						
T T 1 1	2	2.5		5 25	25 45	45 65	65 &
	-2 3		5-15 1 14	5-25 13	25-45 30	45-65 121	over 165
1926 25	9	13	11	12	40	108	149
1927 26	3	10	6	9	45	138	139
1928 27	1	4	5	18	33	100	137
1929 40 2	4	11	15	10	53	152	199
1930 20	5	1	9	13	41	106	142
1931 39	4	5	11	11	37	132	199

									63 &
	U	J_	1-2	2-5	5-15	15-2	5 25-4	5 45-65	over
1932	3	33	3	6	17	8	36	107	167
1933	• • •	23	5	7	6	12	35	132	193
1934		21	2	3	7	15	29	109	177
1935		13	4	1	7	9	41	126	211
1936		22	3	3	13	5	36	128	209

WARD INCIDENCE.

	N.	C.	S.	E.	P.	W.
1925	 69	66	62	84	86	39
1926	 58	57	86	62	66	30
1927	 54	61	79	64	72	46
1928	 51	58	67	46	54	49
1929	 76	80	113	91	87	57
1930	 56	49	67	57	59	49
1931	 63	82	81	86	61	65
1932	 67	62	78	66	5 7	47
1933	 80	52	80	72	69	60
1934	 56	58	84	62	53	50
1935	 66	71	87	71	67	50
1936	 70	59	99	70	59	62

SEASONAL INCIDENCE.

	Jan.	Feb.	Mar.	Apr.	May.	Jne.	Jly.	Aug.	Sep.	Oct.	Nov.	Dec.
1925	50	32	29	37	39	27	33	31	28	27	25	48
1926	29	29	28	59	40	24	16	1.7	25	23	27	42
1927	30	48	40	35	28	25	25	25	34	21	25	40
1928	29	37	30	25	33	21	31	20	21	26	26	26
1929	42	87	73	34	47	29	31	28	29	30	39	35
1930	36	36	34	35	28	28	21	19	18	26	22	34

-	Jan.	Feb.	Mar.	Apr.	May.	Jne.	Лу.	Aug.	Sep.	Oct.	Nov.	Dec.
1931	58	40	46	37	44	36	23	25	25	27	34	43
1932	47	33	41	31	30	30	22	22	26	25	35	36
1933	59	40	40	33	27	33	23	26	20	31	32	49
1934	42	42	33	28	28	32	28	20	21	20	31	38
1935	32	34	48	42	25	33	29	25	32	42	23	47
1936	50	44	44	35	36	25	20	31	24	48	27	35

DEATHS FROM INFECTIOUS DISEASES.

		1930	1931	1932	1933	1934	1935	1936	
Males		31	53	43	34	28	29	34	
Females		26	42	29	31	22	20	17	
(Including Tuberculosis).									

DEATHS FROM CANCER.

Males	 26	18	23	30	29	23	28
Females	21	32	20	25	22	22	27

DEATHS FROM VIOLENCE.

Accident	8	6	9	- 11	10	12	-11
Suicide	7	9	7	4	7	8	3

DEATHS 65 YEARS AND OVER.

		1930	1931	1932	1933	1934	1935	1936
65-70		41	56	45	60	57	58	52
70-80		73	93	95	92	85	105	106
80-90		24	48	25	40	30	45	49
90 and	over	4	2	2	1	5	3	2

CAUSES OF DEATHS.

REGISTRAR GENERAL'S RETURNS.

Cause of Death 1	931	1932	1933	1934	1935	1936
Typhoid and Paraty-						
phoid Fevers	—			1	_	
Measles	1	2	1	_	_	1
Scarlet Fever	_	2	_	3		
Whooping Cough	6	2	3	1	1	_
Diphtheria	5	7	3			4
Influenza	13	5	16	3	7	3
Encephalitis Lethargica	5		1	_	2	
Cerebro-spinal Fever	1		_	1	1	
Tuberculosis of Re-						
spiratory System	16	15	16	11	22	17
Other Tuberculous						
Diseases	4	5	2	3	4	4
Syphilis				3		
General Paralysis of						
the Insane, Tabes Dorsalis	1	1	2	2		
Cancer, Malignant				2		
Disease	50	43	55	51	45	55
Diabetes	6	5	7	7	4	5
Cerebral Hæmorrhage,						
etc	16	21	39	23	31	32
Heart Disease	94	77	95	77	118	110
Aneurysm			_	2	1	_
Other Circulatory						
Diseases	23	25	20	20	25	32
Bronchitis	49	28	30	19	18	17

Cago of Death 1	931	1932	1933	1934	1935	1936
Pneumonia (all forms)	43	29	21	24	1.1	18
Other Respiratory						
Diseases	4	5	3	6	6	_
Peptic Ulcer	1	3	3	2	1	3
Diarrhœa, etc. (under						
2 years)		2	I	3	1	4
Appendicitis	_	1	1	2	2	4
Cirrhosis of Liver	2	_	1		- 1	1
Other Diseases of						
Liver, etc	1	2	1	2	3	3
Other Digestive						
Diseases	8	10	11	7	8	3
Acute and Chronic			2.2		4.0	2.2
Nephritis	22	15	23	17	19	22
Puerperal Sepsis	_	1	_	_		_
Other Puerperal						
Causes	4	2	2	3	4	
Congenital Debility,						
Premature Birth,	2.1	1.2	1.4	1.0	1.0	1.2
Malformations, etc.		13	14	10	10	13
Senility	6	8	4	18	14	21
Suicide	9	7	4	7	8	3
Other Violence	6	9	11	10	12	11
Other Defined						
Diseases	19	32	21	25	34	36
Causes Ill-defined or	0					
Unknown	3	_	1	1	_	_
Totals	439	377	412	364	413	422

*Other Bespiratory Diseases.	0.73 0.73 1.19 1.20 1.87	1.97
R. r.y	0.36 0.56 0.50 0.50	0.48 0.33 0.43 0.43 1.03 0.58
OTHER Infantile Mortality Rate (per 1,000 births) from Congenital Debility Malformation and Premature Birth.	51 16 16 42 17	80 47 0.4 49 31 0.3 59 21 0.3 53 30 0.4 66 41 1.0 52 31 0.5 other Respiratory Diseases.
5, WITH Infantile Mortality Rate.	81 87 63 62	80 49 59 53 66 52 her Res
Crude Death Rate.	16.3	13.3 12.4 14.5 11.1 13.9 14.4 and ot
Crude Birth District Di	29,750 29,750 22,620 28,110 25,660 25,660	Radcliffe (B.) 26,860 12.8 Royton 15,950 11.6 Swinton & Pendlebury (B) 38,980 15.2 Waterloo-with-Seaforth 30,980 14.9 MIDDLETON (B.) 29,110 14.3

	rths	Total Deaths under one year.	59	63	55	99	52
	Rate per ,000 live Births	Diarrhæa and Enteritis (under two years.	5.9	8.2	3.4	4.4	9.5
>	1,000	Violence.	0.52	0.45	0.39	0.52	0.48
FALIT	lation.	Influenza.	0.14	0.14	0.15	0.14	0.10
MOR ures).	0 Popu	Diphtheria.	0.07	0.08	0.05	0.05	0.13
RATE, DEATH RATE AND ANALYSIS OF MORTALITY during the Year 1936. (Provisional Figures).	Annual Death Rate per 1,000 Population.	Whooping Cough	0.05	90.0	0.04	90.0	1
NALY: rovision	Rate p	Scarlet Fever.	0.01	0.01	0.01	0.01	
AND A	Death	Measles.	0,07	60.0	0.04	0.14	0.03
1936	nnual	Small-pox.	1				-1
TH R∆ e Year	4	Enteric Fever.	0.01	0.01	0.00	0.01	1
TE, DEATH RATE AND during the Year 1936.		All Causes.	12.1	12.3	0.64 11.5 0.00 — 0.04 25.000 to 50.000 at Census 1931)	12.5	14.4
			0.61	0.67			0.48
BIRTH		Birth Rate per 1,000 Tota Population Live Still Births. birth	14.8	14.9	15.0	13.6	14.3
· (p)			England & Wales 132 County Boroughs	l owns in- cluding London .	Towns 15.0 (Resident Populations	London	(B)

														2	6															
1901-1910, OUGH).	Rate of	. –	- per	1,000	Births.	162	145	93	79	1 4	80	9/	06	78	72	72	54	95	57	63	63	96	46	66	80	9	53.	35	52	1, 1,
1900, BOR	***************************************	Diamine		ī	. Deaths.	148	011	01	80	9	7	4	15	6	2	4	ব	9	3	9	_	ĭ	_		2	_	ω	_	4	1
	Diphtheria	Membranous	Croup.		3. Deaths	48	4	9	9	5		2	5		_	_		_		ω	_	4	2	5	7	ω	1		4	1016
PERIODS, RS (MIDDI	Ω	Fever. M			ths. Cases	80	165							- 17	<u> </u>	=	6 -	- 12	=	- 39	- 27	- 21	- 22	- 43	- 72	- 19	- 19	- 12	- 26	
NNIAL O YEA		Enteric F			Cases. Deaths		62	6	2	4	3	 -	 -	8		5	 -	 -				 -	 -	 -	_					J
	ion.		Phthisis	Death —	<u> </u>							89.	.17	.79	.93	.65	.65	.48	. 74	- 14.	- 65	.67	19:	.54	.51	.55	.38	.75	.58	1 1
FOR THE TWO	of Population	- Epi		ath	Rate. R	1.71	1.39	0.93	0.81	0.90	∞	54	00	0 69.0	4	51	34	58	21	4	07	08	23	40	5 1	27	0.28 0	90	3	
ICS FOR TI THE LAST	1,000 0		Crude	Death										1 13.3				_	_	_	_	_	_	14.8	12.9	14.2	12.6	14.2	14.4	11
	Per	1		Birth	Rate	27.	23.	17.	15.	4.	13.0	14.0	22.0	19.4	17.	14.	15.2		15.3				14.7	13.2	14 (12.8	13.7	12.7	14.3	
THE VITAL STATIST COMPARED WITH			Period.			0	01-1610	1915	9161	1917	8161	6161	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1017
THE			Pe		Ten Y	186		, Year	6.6	9.9	9.9	9 6	:	:	3.3	3.3	• •	6.6	• •	:	4.6	**	3.3	:	13		:	:	6.6	*D

*Prior to 1916, deaths at all ages are included in these figures: from 1916 onwards, only those

SE TION II.

GENERAL PROVISION OF HEALTH SERVICES.

- 1. PUBLIC HEALTH STAFF. (Vide page 7).
- 2. DEVELOPMENT AND CHANGES IN THE SERVICES PROVIDED UNDER:—
- (a) Laboratory Facilities.

Chemical Analyses County Analyst, Preston.
Bacteriological Investigation . Public Health Laboratory,
York Place, Manchester.

(b) Ambulance Services.

- (a) For Infectious Cases: Fever Motor Ambulance provided by the Health Committee. (New Ambulance obtained during 1933.)
- (b) Non-Infectious and Accident Cases: Two General Motor Ambulances provided by the Watch Committee.

Number of Cases Conveyed to Hospital.

1930	1931	1932	1933	1934	1935	1936
(a) Infectious 117	149	175	81	99	85	81
(b) Non-Infectious:						
Accident Cases 67	52	63	69	56	75	64
Operation & Others 166	190	243	241	227	392	526
To Manchester						
Hospitals 114	118	143	140	143	241	299
To Oldham						
Hospitals 49	36	53	58	30	49	84
Others 18	3 22	24	20	24	37	29

(c) Nursing in the Home.

Home nursing is carried out by the Middleton District Nursing Association. There is a Staff of two trained Queen's Nurses.

Number	of	patients	attended	 	 553
Number	of	visits		 	 5,865

The sick poor are attended free, and a small charge made for those able to pay. 105 necessitous cases received free nursing attendance.

The Honorary Secretary of the Association reports that there has been I Expectant Mother nursed during the year by the Nursing Staff, and no cases of Puerperal Fever.

Nine children under school age received Nursing attention, but none of these were infectious cases.

(d) Treatment Centres and Clinics.

No change during the year.

Details of clinics are given in the Maternity and Child Welfare and School Medical Sections of the Report.

(e) Hospitals—Public and Voluntary.

HOSPITALS.

(a) Attendance of patients during the year.

		In-Patients.	Out-Patients.
		(Pulmonary	(New cases
		Hospitals	referred for
		Sanatoria,	diagnosis).
		&c.)	(T.B.
			Dispensary)
(1)	Tuberculosis	18	55
(2)	Maternity:		
	(St. Mary's Hospita	d,	
	Manchester)	55	56

(3)	Children:	,			
·	(Pendlebury Child Hospital, Manches		45		109
	·	ster.)			107
(4)	Fever		58		
(5)	Smallpox				
•	Manchester Royal Infir	_	221		438
	Salford Royal Hospita		14		4
(8)	Oldham Royal Infirma	ry	35		23
	(b) Hosp	itals av	ailable		
		/ M 1	T		d Salfand
(a)	General Medical General Surgical	Roy	nester r val (Koyai a Oldham	na Saliora Roundary
(b)	General Surgical	Par	k Muni	icipal H	nd Salford Boundary ospital.
(c)	Children		nester		en's Hos-
(d)	Maternity	St. M	ary's F	Hospital	, Manches-
, ,		ter,			,
		Crump	osall ln	firmary,	
				_	Rochdale,
			_		icipal Hos-
(-)	V . 1D:	Ī	al, Oldi		
	Venereal Diseases		County		
(f)	Tuberculosis		County		D 1 M ·
(g)	Chronic Sick			oital.	Park Muni-
(h)	Mental	Ι	Do.	do.	do.
(i)	Mental Deficiency	Ι	Do.	do.	do.
(j)	Orthopædic	Mancl	hester (Children	sHospital,
					and Man-
				oyal Infi	-
(k)	Ear, Nose & Throat				e & Throat
		and	d Child	ren's Ho	ospital.

(1) Puerperal Fever & Pyrexia Marland Hospital, Rochdale.

The Middleton and District Hospitals Committee subscribed £4,313 10s. 0d. to the Manchester Hospitals during the year.

MUNICIPAL HOSPITAL FOR THE AREA.

The facilities available and the terms of the "User Agreement" were published in the Annual Report for 1932 (pages 35-6).

HOSPITAL PROVISION FOR INFECTIOUS DISEASES.

Under the Local Government Act, 1929, Section 63, the Lancashire County Council during the year issued a draft Scheme for the provision of Hospital accommodation for the treatment of Infectious Diseases within the administration of the County. Middleton Area is included in this Scheme.

- (a) Smallpox.—The County is well provided for Hospital accommodation in this respect. The County is divided into 16 areas for this purpose and Middleton Area is grouped in No. X area with Chadderton, Crompton, Failsworth, and Royton. The number of beds required for this area is 36. These are provided for and the present arrangements are satisfactory.
- (b) Infectious Diseases other than Smallpox. The County is divided into 22 areas and Middleton is grouped in No. XI area with Chadderton, Crompton, Failsworth and Royton. The minimum number of beds required for this area is 59, of which Middleton requires 19 (based on 1 bed for 1,500 of the population). At present each Authority in this area has arrangements with adjoining County Boroughs for the Hospital treatment of Infectious Diseases.

Middleton has an agreement with the County Borough of Rochdale to admit Infectious Disease cases to Marland Hospital.

The future arrangements for Middleton cases are at present under consideration.

The Clerk of the County Council points out:—"It does not follow that an existing arrangement with a County Borough Council, which is satisfactory to the County Council, will be disturbed. I would point out, however, that it will be necessary for any such arrangement, in regard to your Borough, to provide for 19 beds to be available at all times."

(c) General.—In the general remarks the County Council states:—"In considering the Scheme your Council will understand that the object is to provide sufficient accommodation for cases requiring hospital treatment, and in the Memorandum L.G.A.40 issued by the Ministry of Health in September, 1930, in this connection, attention was called to the growing need for the provision of hospital treatment for complicated cases of measles, influenza, pneumonia, whooping cough, and the acute infectious diseases of the central nervous system."

MATERNITY HOMES.

One Private Nursing Home situated at Brooklyn, Manchester New Road, Middleton, is registered.

Number of Beds, 5 (since closed).

3. MATERNITY AND CHILD WELFARE SERVICES.
See Section 7.

NATIONAL HEALTH INSURANCE.

There are 15,059 insured persons in the Borough, and 9 General Practitioners, giving an average of 1,673 persons per doctor.

There is helpful co-operation between the doctor and the Public Health Service.

POOR LAW MEDICAL OUTDOOR RELIEF.

The Medical Officer is Dr. H. W. Wallace, 346, Grimshaw Lane, Middleton Junction.

The Public Assistance Hospital for the area is the Oldham Boundary Park Municipal Hospital.

LEGISLATION IN FORCE.

There is no change in this List as published in last year's Report.

A complete list of Acts, Orders and Byelaws is published in the Corporation Year Book.

V.D. CLINIC:

There is no Treatment Centre in the Borough. The following centres are available for local cases:—

Manchester Royal Infirmary, Oxford Road.

Manchester, St. Luke's Hospital, Duke Street, Liverpool Road.

Manchester and Salford Hospital for Skin Diseases, Quay Street, Deansgate.

Manchester, St. Mary's Hospital, Oxford Street.

Manchester, Ancoats Hospital, Mill Street.

Oldham Royal Infirmary, Union Street West, Oldham.

Rochdale Infirmary, Redcross Street.

Salford Municipal Clinic, 155, Regent Road, Salford.

Inder the Public Health (Venereal Diseases) Regulations, 1916, the Lancashire County Council has in operation a scheme for the diagnosis and treatment of venereal diseases, embracing arrangements:—

- (1) for enabling any medical practitioner practising in the area of the County Council to obtain, at the cost of the County Council, a scientific report on any material which the medical practitioner may submit from a patient suspected to be suffering from venereal disease;
- (2) for the treatment at and in hospitals or other institutions of persons suffering from venereal diseases, and
- (3) for supplying medical practitioners with approved arsenobenzene compounds for the treatment of venereal diseases.

The facilities mentioned, both for diagnosis and treatment, are available to registered medical practitioners without charge to them or to their patients.

Further information, if desired, is available by application to the Medical Officer of Health, Health Office, Middleton.

HEALTH EDUCATION.

Under Section 67, P.H. Act, 1925, the publication of information on questions of Health and Diseases and for the delivery of Lectures and the display of pictures dealing with Health Questions have been carried out during the year.

(1) The Personal Health Association carries out an Annual Programme with the approval of the Health Committee on a voluntary basis.

Personal Health Association.

PROGRAMME 1936

- January 21st.—Assembly Hall, 7-30 p.m.—Annual Meeting, by invitation of the Mayor and Mayoress.
- February 4th.—Assembly Hall, 7-30 p.m.—Lecture on "Marriage and Health." G. Fitzgerald, Esq., O.B.E., M.D., Consultant, Manchester Northern Hospital.
- February 18th.—Assembly Hall, 7-30 p.m.—Social in aid of the Mayoress' Personal Health Baby Fund. Whist and Musical Programme.
- March 3rd.—Assembly Hall, 7-30 p.m.—Lecture on "Mental Health." Dr. Gifford, M.D., Medical Superintendent, County Mental Hospital, Prestwich.
- April 4th.—Manchester Town Hall, 3 p.m.—Visit and Inspection of Town Hall. By permission of the Manchester Town Hall Superintendent.
- April 7th.—Assembly Hall, 7-30 p.m.—Juvenile and Young Adults' Meeting. Cinema Films. By invitation—through the Schools.
- April 21st.—Withington Hospital, 7 p.m.—Visit and Inspection of the Hospital. By permission of the Medical Superintendent.
- May 5th.—Nursery School, Rochdale, 3 p.m.—Visit and Inspection of the School. By permission of the Managers of the School.
- May 26th.—New Boarshaw School and Boarshaw Housing Estate, Middleton, 7 p.m.—Visit and inspection of the School and Housing Estate. By permission of the Education and Housing Committees.
- May 30th.—Cinderella Home, Rossall, and Fleetwood Docks. Visit and Inspection of the Home and Docks. By permission of the Executive Council of the "Chronicle" Cinderella Fund and the Manager, L.M.S., Fleetwood.

- Augst 1st.—Parkfield Grounds, 2-30 p.m.—Garden Fete and Sports. By permission of the Town Council.
- October 4th to 10th.—Assembly Hall.—Housing Exhibition.—Health Week. By direction of the Health Committee.
- November 17th.—Assembly Hall, 7-30 p.m.—Health Variety Entertainment.
- December 17th.—Assembly Hall, 2 p.m.—Mothers' Xmas Tree Celebrations.

Health Articles published during the year in the Personal Health Magazine by the Medical Officer of Health:—

- "Not so Well."
- "Cold Weather."
- "Tiredness in Children."
- "A New Idea—The Junior Branch of the Association."
- "Healthy Middleton."
- "Interesting and Useful."
- "Sceptics."
- "Hurray for Health Week."
- "Do you Know?"
- "The Juniors."
- "Health Jubilee."

Health Week was held October 4th-10th, 1936.

The following Cinema Films were shewn during the week:—

- "A Day in the Open Air School."
- "Breathing."
- "The Trapeze Man Talks."
- "Miracles Still Happen."
- "Silver Lining."

- "Giro and His Enemies."
- "County Currents."
- "The Death Mystery."
- "Edward and Eda."
- "The Great Crusade."

A Housing Exhibition was held in the Assembly Hall.

Talks on Health advice in the schools by Mr. Bowen Partington.

A School Children's Afternoon was held in the Empire Theatre, at which educational pictures were shown, and a Health Talk given to the children.

Health Talks at the Mills by Mr. Bowen Partington.

Boarshaw Open-Air School was open to the Public from 4—5 p.m. during the week.

At the Health Centre an Exhibition was displayed during the week and Mothers' Competitions held.

There was a Display of Labour Saving Electrical Apparatus at the Electricity Showrooms.

Exhibits and Cookery Demonstrations were held at the Gas Showrooms.

(See pages 148—150, Section VIII.)

SECTION III.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

Control Authority. Middleton and Heywood Water Board.

The powers of the Board are to execute the various Acts of Parliament in respect of the water undertaking.

Source of Supply.

01 . . .

	Drainage Area.
Ashworth Moor (including Cheesden)	1,380 Acres
Naden Valley	1,250 ,,

The **Supply** is constant and sufficient throughout the area.

Water Analyses show that the chemical and bacteriological results are satisfactory, and indicate that the water is of good quality and free from faecal pollution.

I am informed by the Manager, Water Board, that 12 Analyses were made during the year.

The details of I Chemical and I Bacteriological Analysis are given:—

Chemical Analysis.	Grains
	per Gallon.
Free and Saline Ammonia	 0.0004
Albuminoid Ammonia	 0.0011
Nitrites as Nitrogen	 Nil
Nitrates as Nitrogen	 0.032
Organic Matter, Oxygen absorbed	

Organic Matter, Oxygen absorbed from an acid solution of N/80 KM^N0₄, acting for 4 hours at 80°F. ... 0.021

Combined Chlorine 0.90 "Free" acidity cal ^d . as CO ₂ 0.10 "Combined" alkalinity cal ^d . as CaCO ₃ 1.33 Total Hardness. Soap test 3°.0 Clark Colour of the water when viewed in a 2 ft. glass tube equivalent to 5 m.m. Hazen solution Ph value 7.4 Remarks: A clear water, free from sediment.
Remarks. A clear water, free from Sediment.
Bacteriological Analysis.
(a) Organisms growing on Nutrient Gelatine. Cultivated for 3 days at 20° C. Liquefying 2 Non-liquefying 3 per 1 c.c. of Water.
Total 5
(b) Organisms growing on Nutrient Agar.
Cultivated for 2 days at 37° C.
Total Counts 0 per 1 c.c. of Water
(c) Bacillus Coli Communis.
Found in — Not found in 100 c.c.
(d) B Enteritidis Sporogenes.
Found in — Not found in 100 c.c.
Report.—The chemical and bacteriological results are satisfactory.

Plumbo-Solvent Action. The Water has no plumbo-solvent action as it is treated.

Delling Houses Supplied.

Number	of I	Houses	(including Shops)	9,230
Number	of	Baths		3,750

The supply is direct. No stand pipes are used.

Practically the whole population is supplied, with the exception of about 50 farms and isolated houses in the Borough.

Extensions of New Water Mains.

		Diameter	r.	
Situation.		(inches)	Length in	yards
Kirkway		8	228	
Heywood Road, Heber		6	21	Extension
Dingle Road	• • •	4	365	
Elleray Road		4	132	Extension
Joseph Street		4	127	Renewal
Alkrington Hall Rd. So	uth	4	125	Extension
Manchester New Road		4	72	Extension
Off Jubilee Road		4	54	
Farmway		4	45	
Berwyn Avenue		4	40	
Highfield Street		4	40	
Rochdale Road		4	25	Extension
Rookway		4	25	Extension
High Barn Road		4	16	Extension

Contamination. No form of contamination has been found during the year.

RIVERS AND STREAMS.

The Mersey and Irwell Joint Committee exercises jurisdiction on the Rivers and Streams passing through the Borough, under the Mersey and Irwell Joint Committee

Act, 1892. The streams and all sources of pollution are regularly inspected by the Inspectors of the Joint Committee.

The streams passing through the area are the River lrk, the Wince Brook, the Whit Brook and their tributaries. These streams are all liable to pollution, as they receive, in or about Middleton, effluents from five sewage works, and discharges from storm overflows on the sewerage system of the whole or part of six Local Authorities. In addition, eleven manufactories, chiefly dye works, bleach works, and calico print works, discharge their effluents into the streams, but under the Rivers Pollution Prevention Acts innocuous discoloration is not classed as a pollution.

Serious pollution occurs frequently from running off mill lodges, against which the Rivers Pollution Prevention Acts provide quite inadequate protection. The Royal Commission on Sewage Disposal in their Fifth Report (1908) made recommendations on this matter, but no action has been taken.

Work on the remodelling of the Oldham Corporation Sewage Works was commenced in August last, and good progress has been made.

DRAINAGE AND SEWERAGE.

The drainage and sewerage are partially separate systems. Where possible, the surface drains are run into streams, otherwise they enter the sewers.

The extensions of sewerage, etc., carried out during 1936, were:—

- 1. 9" diameter Pipes. 1,648 yards.
- 2. 12" diameter Pipes. 102 yards.
- 3. 36" diameter Pipes. 160 yards (were laid in Long Street, replacing the existing 24" in diameter pipes).

The sewage is treated by the Manchester Corporation. The cost for disposal during the last financial year ending March, 1936, was £5,466 0s. 0d. Part of Chadderton area is connected to the Middleton sewage system.

The cleansing of the sewers and street gullies is carried out by the Surveyor's Department.

BIRCH-BOWLEE SEWERAGE.

Negotiations are still taking place between the Manchester and Prestwich Authorities with reference to this scheme. During the year 1936, the Heywood Corporation withdrew from the scheme and a new scheme is being prepared.

CLOSET ACCOMMODATION.

The estimated number of closets in connection with dwellinghouses is:—

Fresh	Water	Closets		 4,782
Waste	Water	Closets		 2,939
Pail Cl	osets		• • •	 253
				7,974

Conversions of pail closets to fresh-water closets during the past eight years:—

The Local Authority contributes up to half cost in the case of private property.

Number of waste water-closets converted to fresh water-closets during the year 2, making 6 for the past 5 years.

(1) House Refuse is dealt with by the Sanitary Inspector's Staff.

(a) Storage.

(1)	(2)	(3)
Number of	Number of	Number of
Brick Ashpits.	Wall Ashbins.	Movable Ashbins.
1,474	362	5,202

Number of defective ashpits and want of ashpit accommodation reported in:

NT . 1	٢	11 1	1	1		
176	208	171	188	123	157	45
1930	1931	1932	1933	1934	1935	1936

Number of movable ashbins issued:

			100210			
1930	1931	1932	1933	1934	1935	1936
145	148	160	197	179	235	240

Number of houses at which moveable ashbins have been substituted for fixed receptacles was 70 during the year, making 226 for the past 5 years.

(b) Removal.

Vehicles used:	Staff employed:
4 Motor Waggons	10 Men on ashes.
	4 Motor drivers.
	1 Night soil man.

The cost of Refuse removal during the financial year was £2,884 10s. 9d.

(c) Disposal.

(1) Destructor situated in the Corporation Yard, under the supervision of the Chief Sanitary Inspector. Staff employed: 4 firemen, I foreman, Tin-Baling Press, I man part time.

- (2) Two Tips at Green Street, and Rhodes.
- (2) **Refuse** from Manufacturers and Traders' Premises is removed to Destructor by the owners themselves.
- (3) Refuse from Earth Closets and Privies is removed in a nightsoil tank which is attachable to a motor waggon, and the contents disposed of to farmers for manure.
- (4) Cesspools. There are no open cesspools.

Septic tanks in connection with property where no sewers exist are emptied by the Sanitary Department and the contents disposed of into main sewers.

SALVAGE PLANT.

The Salvage scheme for the treatment of refuse progressed a step farther during the year when it was decided to erect the new Refuse Disposal Plant on the site of the present Destructor, and the Health Committee resolved:—

"To recommend:

- (1) That subject to the approval of the Ministry of Health the Tender submitted by Messrs. Heenan and Froude, Ltd., of Worcester, amounting to £8,996 be accepted and that the Contract therefore be sealed, and
- (2) The Finance and General Purposes Committee to apply to the Ministry of Health for sanction to the borrowing of £9,000 to cover the cost of the supply and erection of such Refuse Disposal Plant."

The date of the Ministry of Health Inquiry was fixed for January, 1937.

STABLES AND COWSHEDS.

Reconstruction and Improvements at Farms—A number of consultations were held with the owners or their agents at farms during the year, with a view to obtaining Dairy Provision at the farms and improvements in the Cowsheds. Work carried out during the year:—

Rhodes Green Farm ... New dairy; improvements (Coates) to cowshed

Woodside Farm, Hopwood . New dairy.

Langley Lane Farm ... New dairy; improved lighting and ventilation of cowshed; cowshed floor reconstructed.

WATER SUPPLY AT FARMS.

One sample of Well Water was submitted for bacteriological analysis during the year, with the following result:—

"No organism giving all the reactions of the true B. coli group was isolated. The presence of B.lactis aerogenes is either due to soil washings or possibly to excretal pollution of a rather remote nature."

The Well supplied Lower Spa Farm, Spa Farm, Cottages (1 and 2) which have since been demolished under the Housing Act.

SLAUGHTERHOUSES.

There are no Public Slaughterhouses. There are 7 private slaughterhouses, 4 registered and 3 licensed.

These are under constant supervision. The number of visits made by the Sanitary Inspectors during the year was 749.

The slaughterhouses have also been inspected by me during the year.

INSPECTIONS.

made by the Sanitary Inspectors during the year:-

				Number
Factories			 	24
Workshops	and	Workplaces	 	31
Laundries		• • • • • • • • • • • • • • • • • • • •	 	

1					Number
-	Out Works	• • •			
	Shops	• • •	• • •		
	Cinemas	• • •		• • •	4
	Schools	• • •			18
	Canal Boats	• • •		• • •	_
	Common Lodging Houses				33
	Tents, Vans and Sheds		•••		2
	Houses Let in Lodgings	• • •		• • •	22
	Houses under Public Health	h Acts			1,502
	Houses under Housing Act	s			870
	Drainage				120
	Closet Conversion			• • •	8
	Cow Sheds				107
	Dairies				187
	Slaughter Houses				749
	Butchers' Shops				32
	Milk Shops	• • •			6
	Fish and Chip Shops				24
	Ice Cream Factors				1
	Bakehouses				23
	Premises where other food	is prep	oarec	ł	10
	Market Stalls (Food)				195
	Manure Dumps				14
	Rivers and Streams				3
	Smoke Abatement. (Obs	servatio	ons)		89
	Infectious Diseases. (Ren				
	pital)				67
	Vermin—				
	Rats and Mice	• • •			77
	Bugs				37
	Beetles				26
	Lice				
	Disinfection		• • •		4
	Disinfestation	• • •			287
	Sampling-				
	Chemical				
	Bacteriological				117
	Sediment Tests	• • •			

D	c		Served.		
			——— C Statutory	-	_
			Number 1		
NU	mber	Number	Number	vumbei	
Houses	396	156	2	117	_
Closets	114	84	11	73	_
Ashpits	45	42		41	
House-drains	39	39	_	39	_
Waste pipes	6	4	_	4	
Yards and					
Passages	5	5		4	
Accumulations	3	3	_	3	
Other Nuisances .	13	13	2	13	_
Common Lodging					
Houses	—	_	_	_	
Keeping of					
Animals	1	1	_	1	_
Number of De	efects	reported	to Medi	cal	
Officer of	Healt	h		2	90

SMOKE ABATEMENT.

89 Observations were taken by the Sanitary Department during the year:-

The time limit allowed for black smoke emission was exceeded in two instances. Statutory notices were served and complied with.

No legal proceedings were taken.

The number of factory and works chimneys in the district is 59.

Co-operation with the Manchester and District Regional Committee is advocated.

Instruction Classes are held at the Manchester School of Technology for Boiler men.

The Ministry of Health recommends that H.M. Alkali Department should act as liaison between Local Authorities and the Ministry in matters relating to Smoke Nuisances.

The following resolution was passed by the West Riding of the Yorkshire Regional Smoke Abatement Committee during the year:—

"That this Committee is of opinion that the time has now arrived when serious consideration should be given to the desirability of the qualified exemption enjoyed by certain industries under the Public Health (Smoke Abatement) Act, 1926, being withdrawn."

FACTORIES, WORKSHOPS AND WORKPLACES.

1. Inspection of Factories, Workshops and Workplaces, including Inspections made by Sanitary Inspectors.

		Number of		
Premises.	Inspections.		Occupiers prosecuted	
(1)	(2)	(3)	(4)	
Factories	24	1		
(Including Factory Law dries).	un-			
Workshops	31	1		
(Including Worksho	op			
Workplaces		_	_	
(Other than Outworked premises).	ers'			
Total	55	2		

2. Defects found in Factories, Workshops and Work-places.

	Nui	mber of		Number of Offences in respect to which
Particulars.	Found.	Remedie	ed. to H.M.	Prosecu-
(1)	(2)	(3)	(4)	(5)
Nuisances under the Public Health Acts:				
Want of Cleanliness		_	_	_
Want of Ventilation		_	_	_
Overcrowding	•	_		_
Want of drainage of floors	_	_	_	_
Other Nuisances	3	3	_	_
Sanitary Accommodation Insufficient, Unsuitable or Defec-				
tive (Not Separate for		. —	_	<u></u>
Sexes) Offences under the Factory & Workshops Acts: Illegal Occupation of Underground	_	_	_	_
Bakehouse (s.101) Other Offences		_	_	_
Total	3	3		

OMMON LODGING HOUSES. There are 2 in the Borough, registered.

			Accomn	nodation
· Address			Bedrooms	Occupants
15, Simpson Street			4	12
58, Old Hall Street			5	17
Total	• • •	• • •	9	29
			_	

The Bye-Laws are observed.

CANAL BOATS.

No inspections were carried out during the year.

UNDERGROUND SLEEPING ROOMS.

None exist.

TENTS, VANS AND SHEDS.

No action was taken under the Bye-Laws.

RAG FLOCK ACTS.

No action was taken during the year.

HOUSES LET IN LODGINGS.

Five Houses are registered. The accommodation in each house is as follows:—

Total No. Total of Rooms Washing No. of Available W.C.'s Accommoda-Bath Address Rooms (let in tion lodgings) 2, Heap Street Wash Boiler 9 2 No 196-8, Oldham Road 8 Wash House Yes 5 3, Park Street . 9 2 Scullery No Sedgeley House 9 4 2 Wash House Yes 25, King Street. 13 Cellar No

DISEASES OF ANIMALS ACTS.

1

Swine Fever.—4 licences were issued under the Regution of Movement of Swine Order of 1922.

RATS AND MICE DESTRUCTION ACT, 1920. A notice was issued in the Press during Rat Week.

Complaints were received during the year regarding Rat infestation.

The method of dealing with the pest has been the use of Liverpool Virus and Baiting.

THE SANITARY CONDITION OF THE SCHOOLS vide the School Medical Report, page 142.

PUBLIC BATHS.

The Baths were used by 28,582 persons during the year, including 18,884 School Children.

The number of baths in private houses is 3,750, equal only to 40.62% of the total houses, or 1 to every 9 persons.

The present public swimming bath dates from 1860. The bath is overcrowded in summer weather. There is a deficiency of cubicles and sanitary arrangements.

The water is changed every third day and is treated with Hypochlorite Fluid.

Baths Premises.

The Watch Committee directed me to prepare a detailed report on the premises occupied by the Baths Superintendent.

The building was found, owing to Sanitary Defects, unfit for human habitation.

Ne Baths.

The Ministry of Health's Inquiry into the Council's application to borrow £28,600 for the provision of new Baths was held in February, 1936.

The New Baths to be erected in Suffield Street will occupy an area of 3,640 square yards.

The main Swimming Pool will be 100ft. x 35ft., with a maximum depth of 10ft. at one end. The children's pool is 30ft. x 22ft. There is accommodation for eight slipper baths. The Dressing Rooms are equipped with shower foot baths.

The method of purification will be chlorination.

Kitchen and Dining Room are provided for on the first floor.

At the back of the building at basement level accommodation is reserved for Boilerhouse, Laundry, Filtration plant and Storage.

Additional communal dressing accommodation for children is available at this level.

The water heating and that of the building will be by gas-fired boilers.

Ventilation of the Building is by natural means assisted by exhaust fans.

The main pool hall has an area of 140ft. x 54ft., with balcony on 3 sides, and can be utilized for public meetings in the Winter session.

ERADICATION OF BED BUGS.

No. of houses found to be infested-

Council Houses	 	 	3
Other Houses			23

No. of houses disinfested—		杨-
Council Houses	3	
Other Houses	23	

In addition 116 houses were fumigated prior to demolition.

The method employed for freeing infested houses from bed-bugs is by fumigation by hydro-cyanic acid gas, the bedding being treated by steam disinfection.

In all cases of re-housing under the Slum Clearance programme, the furniture and effects of the tenants are removed by the Corporation free of charge and are treated in the removal van with hydro-cyanic acid gas. The bedding is treated in the steam disinfector.

The sealing of premises is carried out by the Corporation Staff. The fumigation by hydro-cyanic acid gas is done by a Contractor.

SECTION IV.

HOUSING.

(a) Statistics.	
Number of new houses erected during the year:	
(a) Total (including numbers given separately	
	94
	40
(2) By other Local Authorities	Vil.
. (3) By other bodies and persons	54
(b) With State assistance under the Housing Acts	:
(1) By the Local Authority	84
	Nil.
1. Inspection of Dwelling-houses during the year:—	
(1) (a) Total number of dwelling-houses in-	
spected for housing defects (under	
Public Health or Housing Acts) 6	509
(b) Number of inspections made for the	
purpose 2,2	372
(2) (a) Number of dwelling-houses (included	
under sub-head (I) above) which	
were inspected and recorded under	
the Housing Consolidated Regula-	
	134
(b) Number of inspections made for the	, ,
	370
(3) Number of dwelling-houses found to be in	
a state so dangerous or injurious to	
health as to be unfit for human	

habitation

89

g Il	those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation
d y	2. Remedy of Defects during the year without serve formal notices:— Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers
	3. Action under Statutory Powers during the year:- A.—Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930:—
e	(1) Number of dwelling-houses in respect of which notices were served requiring repairs
y e-	(2) Number of dwelling-houses which were rendered fit after service of formal notices:— (a) By owners: 3 (b) By Local Authority in default of owners: Nil.
e	B.—Proceedings under Public Health Acts:— (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied
d _) e-	(2) Number of dwelling-houses in which defects were remedied after service of formal notices:— (a) By owners: 236. (b) Local Authority in default of owners: Nil.

Proceedings under Sections 19 and 21 of the Housing Act, 1930:—	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	12
(2) Number of dwelling-houses de- molished in pursuance of Demolition Orders	11
D.—Proceedings under Section 20 of the Housing Act, 1930:—	
(1) Number of separate tenements or underground rooms in respect	
of which Closing Orders were made	Nil.
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil.
Housing Act, 1935.—Overcrowding:—	
 (a) (1) Number of dwellings overcrowded at the end of the year (2) Number of families dwelling therein (3) Number of persons dwelling therein 	162 204 1176
(b) Number of new cases of overcrowding reported during the year	Nil
(c) (1) Number of cases of overcrowding relieved during the year	Nil
(2) Number of persons concerned in such cases	Nil.

4.

5.	Number of Houses owned by the Local Authority	4
	Built during the last two years:—	
	Housing Act, 1925 (Part 2) Housing Act, 1925 (Part 3)—	Nil.
	Completed February, 1936	45
	To be completed February, 1937	56
	In course of erection	Nil.
	,,	Nil.
	Built previously:—	
	Other powers	557
	Allocated to the Housing Act, 1930	156
(P	Further houses built under the Housing Act, Part 3) will be allocated to the Housing Act, 1930.	1925

(b) Housing Conditions.

I. General Observations.

The majority is Cottage property, consisting of 4—5 rooms.

There is a certain amount of old property and eight back-to-back houses. Vide Housing Statistics.

Bathrooms in houses: 3,750.

Housing Defects discovered during the year: 396.

New houses built during the year: 294, and since 1921: 2,274.

2. Sufficiency.

(a) Extent of shortage, if any, of houses available at reasonable rents, and the measures taken or contemplated to meet any shortage:—

Rate of building before 1914: 95 houses per year; since 1914: 105 per year.

- (b) (1) Increase of population since 1931: Nil.
 - (2) Overcrowding.

3. Overcrowding.

In accordance with Circular 1507, the Ministry of Health required a Report on the result of the Inspection for Overcrowding, and the number of houses required to relieve overcrowding to be prepared and submitted on the 1st June, 1936.

Results of the Survey.

162 dwellings were found to be overcrowded at the end of the year. These dwellings were occupied by 204 families, comprising 1,176 persons.

4. Fitness of Houses.

- (a) No difficulties were experienced under the Public Health Acts or of the Housing Acts.
- (b) 89 Insanitary houses were reported to the Housing Committee during the year.
- (c) The extent to which houses have not an adequate water supply is small as 9,230 houses (including all property, shops, etc.) have internal private water supply from Middleton and Heywood Water Board. There are no common water supplies in private house property.

Farm and Farm Cottages are in some cases supplied from wells direct and others by the Heywood and Middleton Water Board.

(d) The extent to which houses have no water closet only exist where no sewage arrangements are available, and in that case Pail Closets are in use to the extent of 253, and 65 attached to middens in the case of farms.

displaced tenants

In 1,850 cases there are 2 houses	with W.C.
,, 136 ,, 3 ,,	,,
,, 4 ,, 4	,,
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,
5. Unhealthy Areas.	
An area is defined "unhealthy" because of planning (narrow streets, congestion of of ventilation, and open spaces), (2) structured want of sanitary conveniences in individual evidence of unhealthiness—high death-rate dence of Infectious Diseases, high Infantile	buildings, want ural defects and al houses, (3) , excessive inci-
89 Unfit houses were dealt with in 8 (and 46 as Individual Unfit houses.	Clearance Areas
Action taken during the year regarding	g:
Clearance Areas—	
Number of areas represented	. 8
Comprising	. 43 houses
Number of areas cleared	
Comprising	. 108 houses
Number of houses built to re-house dis	; -
placed tenants	0.4
Improvement Areas—	
Number of areas represented	Nil.
Comprising	5 7 c 2
Number of houses demolished	INII.
Number of tenants dia 1	
Number of new houses built to re-house	Nil.

Nil.

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er n- Total	167	9	8	181	103	284
Houses dealt with under Part 11 of the Act, in- cluding Houses in Improvement Areas	17	9	8	31		
Honses dealt with in Clear-ance Areas	Number of Houses included in the Total Programme (1) which have been demolished 150 (2) which have been made fit	(3) which have been put out of use for human habitation (including parts of building closed) and are not to be demolished (4) which are not accounted for in Items 1 to 3	but in respect of which no further action is required	ms 1 to 4 150	(6) in respect of which action is necessary but was not completed by 31st March, 1937 (including 74 houses to be dealt with in Cléarance Areas)	ns 5 and 6
	Number of Houses (1) which have (2) which have	(5) which have habitation closed) and (4) which are n	but in respe . required	(5) Total of Items	(6) in respect of wlwas not comple (including 74 l Cléarance Areas	(7) Total of Items 5

REPORT AS TO POSITION ON 31st DECEMBER, \$36.

CLEARANCE ORDERS.

Order

No. Property.

Position.

13. Nos. 23, 25, 27, 29, 31,33, Union Street, 16,18, 20, Spring Gardens

Demolished.

Spa Cottage. 1st and
 2nd Lower Spa Farm.

Demolished.

16. Nos. 1, 2, 3, 4, lvy Cottages.

Demolished.

15. Nos. 17, 19, 21, Factory Disinfested, awaiting demoli-Street. tion.

Date of which demolition should be completed:

5th August, 1936.

Démolished.

19. Nos. 12, 14, 16, 18, John Lee Fold.

Nos. 1, 2, 3, 4, 5, 6, 7,
 Fielding Square.

1. Nos. 1, 3, 4, 7, 9, 11, 13, 15, 17, 19, 4, 6, Boarshaw Clough.

 Nos. 150A, 28, 30, 32, Boarshaw Clough.

3. Nos. 6, 7, 8, 9, 10, 12, 13, Mills Hill.

 Nos. 12, Irk Street, 13, Simpson Street, 14, 16, 18, 20, Irk Street.

5. Nos. 1 off 580, 580, 582, 584, Manchester Old Road.

6. Nos. 112, 114, 116, Boardman Lane. Orger

No. Property.

7. Nos. 53, 55, 57, and 59, Manchester New Road, 2, 4, 6, 8, 10, 12, 1 off 12, Park Street.

- 8. Nos. 21, 23, 25, Park Street.
- 9. Nos. 13, 15, 17, Allison Street.
- Nos. 84, 86, 88, Boardman Lane.
- 12. Nos. 1, 2, 3, Fielding Terrace.
- 14. Nos. 6/8, 10, Market Street, 7, 9, Water Street.
- 17. Nos. 1, 2, 3, Little Green.
- 20. Nos. 1, 2, 3, 4, Mill Fold.

Nos. 1 and 3, Dyson Square. 56, Hannah Street. Nos. 5 and 7, Bridge Street. Position.

Demolished.

Tenants re-housed Awaiting re-housing Demolished.

INDIVIDUAL UNFIT HOUSES.—Section 19.

No. 1, Bonny Brow

Cottages.

No. 2, Bonny Brow

Cottages.

205, Grimshaw Lane.

207, do.

8 off Parkfield.

10 do.

Demolished.

Demolished.

Demolished.

Order No. Property. Position. 36 34, Chapel Street. Demolished. 36. do. 32, Water Street. Demolished. 213, Grimshaw Lane. Demolished. 38, Chapel Street. Demolished 40. do. Nailor's Cottage. Demolition in progress. 3. Barrowfields. Demolished. 5. do. Mere Brook Cottage. Undertaking not to use for human habitation signed by Owner. Vacated. 2, Irk Street. Undertaking not to use for human habitation signed by Owner. Tenant re-housed. Spa Farm Cottage. Undertaking not to use for human habitation signed. Tenant re-housed. 87, Fielding Street. Undertaking not to use for human habitation signed by Owner. Vacated. 78. Walker Street. Undertaking to convert into I, Boardman Lane. one house signed. Tenants rehoused. Works completed. 1, off Holland Street. Undertaking to convert into 8, Bradshaw Street. one house signed. Tenant re-housed.

Date on which demolition or works should be completed: 4th May, 1937.

3, off Holland Street.

10, Bradshaw Street.

1, Harrop's Buildings.

do.

Undertaking to execute works signed and work completed.

Orger

No. Property.

Position.

1, Lower Greenhill.

la. Lower Greenhill.

Works almost completed.

5, Limefield Cottages.

Repairs in progress.

6, do.

7, do.

8, do.

Date on which demolition or works should be completed: 29th February, 1937.

29, King Street.

Repairs almost completed.

31, Assheton Street.

31, King Street

Repairs in progress.

14, Albert Street.

14, Back Albert Street.

Undertaking to convert into one house signed. Tenants

re-housed. Work completed.

33. Assheton Street.

Demolition Order made. Tenant re-housed. Awaiting

Demolition.

HOUSES TO BE REPAIRED.—Section 17.

23, Cheapside.

Works well in hand.

Date for completion of works: 29th September, 1936.

25/27, Cheapside.

Works well in hand.

Date for completion of works: 29th September, 1936.

29, Cheapside.

Works well in hand.

Date for completion of works: 29th September, 1936.

31, Cheapside.

Works well in hand.

Date for completion of works: 29th September, 1936.

Order

No. Property. Position.

33/35. Cheapside.

Works almost completed.

Date for completion of works: 29th September, 1936.

Works almost completed. 4, Fielding Terrace.

do. 5,

6. do.

7, do.

do. 8.

> Date for completion of works: 29th September, 1936.

77, Fielding Street.

Works almost completed.

79, Fielding Street.

Date for completion of works: 30th September, 1936.

83, Fielding Street. Works commenced but not

yet completed. 85, Fielding Street.

Date for completion of works: 16th October, 1936.

215, Grimshaw Lane. Small portion of work done. 217, Grimshaw Lane. Works not commenced.

219, Grimshaw Lane. Works not commenced. Date for completion of works:

16th October, 1936.

HOUSES TO BE REPAIRED OR DEMOLISHED BY ARRANGEMENT.

8, Spring Gardens.

10, do. Work completed.

12. do.

32. Factory Street.

34, do. pleted.

36, do.

Alterations almost

Order No.

Property.

9a, High Street.

Position.

Door to be made through to bedroom of No. 9, High Street. Owners have been supplied with full details of works required and have provisionally agreed to execute the works but written confirmation has not been received.

Works almost completed.

This property has been taken over by J. Thorpe and Co., Ltd., for inclusion in their property.

Demolished by arrangement.

4. Taylor Street.

22, Spring Gardens.

1 off 22, Spring Gardens.

White Hart Meadow.

6. Bye-Laws.

See page 32.

Revised Bye-Laws relating to Nuisances, Common Lodging Houses, Slaughter Houses, are being prepared.

Houses let in lodgings adopted 12—3—29. Tents, vans and sheds adopted 12—3—29.

7. General Observations on housing matters not already covered, and on any difficulties experienced in housing administration and the measures taken to meet them:

The rents in the case of unemployed families who are re-housed under demolition orders are based on Income and Size of Family.

The type of Council houses built does not accommodate large families, but consideration is being given to individual families.

- (1) Representations made in respect of 46 individual houses.
- (2) 18 individual houses demolished.
- (3) Compulsory purchase approved for Little Park area. (Number of houses 50; business premises 13; licensed premises 2).

Housing Conditions and Tuberculosis.

I submitted during the year a Report on the housing conditions in Tuberculosis families, which showed that in (a) Pulmonary cases there were 3 families, and (b) in Non-Pulmonary cases there were 7 families living in overcrowded conditions, and in addition the housing conditions were in other respects—in congested area—1; in Sanitary disrepair, etc.—20, among 32 Tubercular families.

Local Authority's Housing Scheme.

- (1) 294 houses have been erected during the year of which 140 are Corporation houses.
- (2) Two new Corporation Housing Schemes have been completed—
 - (a) 87 Houses and 18 Bungalows, Tennyson Road and Shirley Avenue, Boarshaw.
 - (b) 35 Larger Type Houses, Boarshaw Lane and Valley Road, Dale Road and Hilton Fold Lane.
- (3) Two new Corporation Housing Schemes are contemplated in the near future—

(a) Moor Close Estate, which will comprise 370 houses, and (b) Walker Street, Rhodes, which will comprise 62 houses.

Town Planning.

This Scheme is still in course of preparation in cooperation with the Manchester and District Regional Planning Committee. The Draft Scheme is now receiving the consideration of the Surveyor's Sub-Committee, and is expected to be completed at an early date.

SECTION V.

2.

INSPECTION AND SUPERVISION OF FOOD.

(a) MILK SUPPLY.

The farms and dairies have been under frequent supervision during the year. Inspections: 187.

The improvements effected in farm buildings, as a result of conferences at the farms, are stated on page 44.

Under the 1915 Act, 7 cases have been referred to the County Authority.

Under the Milk (Special Designations) Orders, 1923 and 1936, no Supplementary Licence was issued for "Certified" Milk. One Licence for Bottling "Grade A (Tuberculin Tested") Milk, and one for Distribution of "Grade A (Tuberculin Tested)" Milk, were issued during the year.

No. of Licences issued in respect of "Pasteurised" Milk:—

Pasteurising plants: Nil.

Retail distributors: 16; Supplementary: Nil.

There were no refusals or revocations of registers of retailers required during the year.

The number of dairy farms in the area is 74, and the approximate number of cows 1,227.

There are 74 cowkeepers on the register. The number of inspections made at the farms was 187. These are made periodically. The conditions of the farm buildings are average for the district.

The standards adopted are in accordance with Bulletin 40 (Ministry of Health).

The number of Milk Purveyors (other than Cow-keepers) on the Register is 53.

Veterinary Inspection of Dairy Cows is not carried out as a routine. There is a part-time Veterinary Surgeon whose services are called in for special cases. The numbe of cows inspected by the Veterinary Surgeon during the year was 162, and the number found to be suffering from Tuberculosis was 1.

Sediment Testing.

No tests have been made during the year.

Bacteriological Standards.

Standard adopted—Not more than 200,000 bacteria per c.c. No B. Coli in 1/1,000 c.c.

Satisfactory 30; unsatisfactory 2.

Tuberculous Milk.

Tuberculous Milk was found in 6 out of 32 samples of mixed milk, bacteriologically examined for T.B. Bacilli, equal to 18.75 per cent.

Tuberculous Cattle.

162 animals were examined under the Tuberculosis Order, 1925, during the year. I animal was slaughtered and the postmortem examination showed the carcase to be affected with generalized T.B.

(b) MEAT AND OTHER FOODS.

The number of Inspections carried out during the year was 1,040, including Slaughter-houses, Bakehouses, and Market.

There is no Public Slaughter House.

There are 7 Private Slaughter-houses, four of which are registered and 3 licensed.

Bakehouses number 23. Their condition is average.

The amount of food condemned or surrendered during the year as unfit for human consumption was:—

				3 1	Number of Condemnations.	
			Entire	e e	Parts of carcases	rcases
			carcases.	ses.	or organs.	uns.
Animal.	Total No. of killings.	2	lumber of carcases For Tuber-nspected. culosis.	For diseases other than Tuberculosis	For Tuber- culosis	For diseases other than Tuberculosis.
Cattle (other than cows)		7	4	-	٧	a
Cows	617	617	4	_	0	C
Calves	46	46			I	
Sheep						
Lambs	5,250	5,200	1	2	-	-
Pigs	298	296	1	1		
Total	5,867	5,815	4	3	9	3
						T

No. of legal proceedings, none.
Food poisoning: Action taken (if any):—Nil.

(c) ADULTERATION.

Under the Food and Drugs (Adulteration) Act, 1928:—None.

No action was taken under the Public Health (Condensed Milk) Regulations, 1923 and 1927; the Public Health (Dried Milk) Regulations, 1923 and 1927; the Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927.

(d) CHEMICAL AND BACTERIOLOGICAL EXAMINATIONS OF FOOD.

Under the Food and Drugs Act, Analyses are carried out by the Public Analyst, County Laboratory, and Bacteriological Examinations of Food at the Public Health Laboratory, Manchester.

The following samples were Analysed during the year:—

(a) Chemical.

There is co-operation with the Police Authority in carrying out sampling under the Food and Drugs Acts for this Area.

Samples taken by the County Authority.

		No.	Not	Analyst's
Sample.	Ger	nuine.	Genuine.	Remarks.
Milk	 	56	_	_
Boiled Sweets	 	1	_	
Boracic Powder	 	1	_	_
Danish Butter	 •	-1	_	_
Rice	 	2	_	
Fish Paste		1	_	_
Potted Meat		2	_	_

		_	lo.	Not	Analyst's
Sample.		Gen	uine.	Genuin	e. Remarks.
Pickles			1	_	_
Vinegar			4		
Cream		• • •	1	_	
Tea	• •	• • •	2	_	_
Butter			1	_	
Gravy Browning			2		_
Plain Flour			1		_
Sausages	•		1	_	 .
Honey			1	_	_
Dried Apricots .			1		_
Salmon and Shrim	р Ра	ste	1	· —	_
Baking Powder .			1		
Pepper			1	_	
Almond Essence			1		_
Sild			1		_
Olive Oil	• • •		1	_	—
Tapioca	• • •	• • •	1	_	_
Glycerine	• • •	• • •	T.	. —	_
Borax	• • •		1	_	
Sauce	• • •	• • •	1		
Sardines			1		
Margarine	• • •		I	_	
T	otal		91	_	_

(b) Bacteriological.

Positive. Negative. Milk for Bovine T.B. ... 8 ... 108

³² samples of Milk were examined for Bacterial Count and Bacillus Coli.

³² samples were taken for the Local Authority and 84 for the County Council by the Local Sanitary Staff.

MLK ANALYSIS FOR BACTERIAL COUNT AND B. COLI (for Local Authority).

	Ва	acteria growing	on	i	ತ. Coli fo	ound in
Sample	sta	ndard agar at 3	7° C.			
No.		in 48 hours.		1.0 c.c.	0.1 c.c.	0.01 c.c.
12,896		2,800		Yes	Yes	Yes
12,897		6,500		Yes	Yes	No
12,898		191,000		Yes	Yes	Yes
12,899		200,000	• • •	Yes	Yes	Yes
13,201		28,000		Yes	Yes	No
13,262		30,000		Yes	Yes	Yes
13,263		39,500		Yes	Yes	No
13,264		45,000	• • •	Yes	Yes	Yes
13,472		6,750		No	No	No
13,473		5,550		Yes	Yes	No
13,474		33,000		Yes	Yes	Yes
13,475		3,100		Yes	Yes	No
13,680		1,500		No	No	No
13,681		4,000		No	No	No
13,682		8,100		Yes	No	No
13,683		10,000		No	No	No
13,694		5,350		Yes	Yes	No
13,695		33,500		Yes	Yes	Yes
13,696		800		Yes	No	No
13,938†		535,000	• • •	Yes	Yes	Yes
13,939†		1,240,000		Yes	Yes	Yes
13,940		16,750		Yes	Yes	Yes
14,156		17,250		Yes	Yes	Yes
14,157		690		Yes	Yes	Yes
14,265	• • •	8,950		Yes	Yes	Yes
14,266*		210,000		Yes	Yes	Yes
14,267	• • •	5,150		Yes	Yes	No
14,268		8,400		Yes	Yes	Yes
14,727	• • •	41,000		No	No	No
14,728		195,330		Yes	Yes	Yes
14,729		39,500	• • •	Yes	Yes	No
14,730	• • •	52,000		Yes	Yes	Yes
* C		1. 1 1 6			1 .	.17 .

[†] Samples obtained from farmers producing milk in the Chadderton Urban District Council.

^{*} Farmer cautioned. .

NUTRITION.



Particular attention has been given to this subject during the year.

The assessment of Nutrition in the School Child has been the means of bringing this question of Nutrition more prominently before parents, with the result that increased propaganda has been effected.

Attention is drawn to the question at Health Week. in the Schools, at the Clinics, and through the Personal Health Association, and in the Press.

The Mid-day Meals given to the children at the Assembly Hall have the effect of advertising correct dieting.

Greater facilities in Schools' Cookery Classes are needed for this purpose.

At the Gas Showrooms weekly demonstrations are given in Practical Cookery, and Clinic Mothers are invited to attend these Meetings.

(See page 159, Section VIII.)

SECTION VI.

INFECTIOUS DISEASES.

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

During the year there were notified 500 cases of Infectious Diseases, as compared with a total of 493 in 1935; of these 382 were Chickenpox. Scarlet Fever numbered 48, as compared with 86 in 1935. Notified Pneumonia occurred in 32 cases, as compared with 44 in 1935.

Diphtheria accounted for 26 as compared with 12 notified in 1935.

Of the total, 63 cases were removed to Hospital, equal to 12.6 per cent., as compared with 13.19 per cent. in 1935. 30 deaths occurred, 17 of which were hospital cases, and 18 of the total deaths were due to Pneumonia, 4 to Diphtheria, 1 to Measles, — to Whooping Cough (not notified), 4 Diarrhæa (under 2 years), and 3 Influenza.

The above total does not include Tuberculosis, of which 29 notifications were received and 21 deaths.

SMALLPOX AND CONTACTS.

This area was free from Smallpox during the year.

SCARLET FEVER.

Of the 48 cases notified, 32 were treated in hospital, equal to 66.67 per cent. of the notified cases.

The period in hospital averaged 32 days as compared with 37 in 1935.

3 cases received Serum Treatment in hospital (10 c.c. A.S.F.).

Most of the cases of Scarlet Fever admitted to Marland Hospital during the year have been of a mild type, and many of these cases could be nursed at home provided there is the accommodation for isolation.

REASON FOR REMOVAL TO HOSPITAL.

The policy adopted in determining if a case should be retained at home or removed to hospital is as follows:—

Where (1) Isolation can be effected in the home; (2) the case mild; and (3) the mother capable of carrying out nursing instructions, the case can reasonably be considered for domiciliary treatment.

But where (1) there is overcrowding or other young children in the family; (2) unemployment; and (3) the case severe or complicated and requiring skilled nursing, hospital treatment is indicated.

When a case is removed to hospital a note is made on the Investigation Report of the reason for removal. The following causes for removal were noted during the year:—

No one at home to nurse case.

Unable to isolate.

Doctors orders.

Younger child in family.

Mother unable to nurse case.

Unemployment—unable to pay for doctor.

Mother ill.

In lodgings.

On account of mixed business.

SERUM TREATMENT.

Scarlet Fever Streptococcus Antitoxin is kept in stock at the Health Centre for use by the Doctors in Domiciliary cases. Only one phial has been requisitioned during the year.

For hospital cases serum treatment is restricted to acute cases admitted early with profuse rash and high temperature, or where there is toxic manifestations.

It has been found inadvisable to give Serum treatment to mild cases.

DISCHARGES FROM HOSPITAL.

Complaints are at times received that on discharge a Scarlet Fever patient is still desquamating.

The practice at Marland is to discharge an otherwise clear case of Scarlet Fever on the 28th day. At this stage desquamation per se is not a source of infection.

If a case is retained in hospital over 42 days on account of complications or the severity of the case a report is received from Marland on the case.

The number of cases retained in hospital during the year, over 42 days, and the reasons for the extended treatment were:—

(a) Scarlet Fever Cases—5.

Secondary Inflammation of the Throat	 	- 1
Nasal Discharge	 	i
Nasal Discharge and Enlarged Tonsils	 	1
Secondary Tonsillitis and Chickenpox	 	-1
Chickenpox	 	1

(b) Diphtheria Cases—9.

Positive Swab	-1
Severe Diphtheria and Palatal Paralysis	2
Nasal and Faucial Diphtheria	-1
Severe Diphtheria with extensive Membrane	
and Palatal Paralysis	3

Myocardial Weakness following severe Toxaemia of Diphtheria Secondary Sore Throat and Chickenpox ...

The age group showing greatest incidence was 5—10 years, equal to 43.76 per cent. of the Scarlet Fever cases.

The distribution by Wards was as follows:-

N. C. S. E. P. W. 13 3 5 15 6 6

By Schools, vide page 162.

DIPHTHERIA.

All the 26 cases notified were removed to hospital, equal to 100 per cent., and 4 cases were fatal.

The period in hospital averaged 35 days, as compared with 37 days in 1935.

Age group chiefly affected, 5—10 years: 11 cases.

Distribution by Wards:-

N. C. S. E. P. W. 11 3 2 3 6 1

By Schools, vide page 162.

A Sanitary Inspection was made of each house, and defects found attended to.

Serum treatment in hospital:—

24 cases received A.D. Serum from 8,000 to 112,000 units.

Cases diagnosed by other Authorities and transferred to Marland Hospital:—

I case was notified Diphtheria in Westhulme Hospital, Oldham, and was transferred to Marland Hospital, Rochdale, being a Middleton patient.

Case was notified Nasal Diphtheria in Boundary Park Municipal Hospital, Oldham, and transferred to Marland Hospital, Rochdale. The case subsequently died, the cause of death being certified as Broncho Pneumonia.

I case of Acute Tonsillitis was admitted to hospital and died.

Diphtheria cases admitted to hospital during the year have been of a serious nature. Some of these were of the gravis type.

The type of Scarlet Fever during the year on the other hand has been mild, with the exception of a few which were moderately severe.

CHANGE OF DIAGNOSIS.

2 cases of Scarlet Fever were admitted to hospital. The diagnosis was afterwards changed to German Measles in one case and Tonsillitis in the other.

2 cases were notified Diphtheria and admitted to hospital. The diagnosis was afterwards changed to Tonsillitis in one case and Broncho-Pneumonia in the other. The case of Broncho-Pneumonia died in hospital.

DIPHTHERIA IMMUNIZATION.

The present system in use is to supply the Serum free of charge to the Doctors, and to refer parents to their own Doctors for Immunization.

The parents make their own arrangements with the Doctors as to fees, but in necessitous cases a form of application for free treatment is given to the parents.

During the year there is a record of 55 children having been immunized.

It is evident that this system will not lead to mass lmmunization of the child population.

Under the re-organization of the Maternity and CMJ Welfare Service it is advocated that an Immunization Clinic be set up and Immunization made available in the homes for all parents willing to have protection carried out.

ERYSIPELAS.

2 cases were notified and were nursed at home.

Infection was traced in one case to l.C.T. Nose and in the other to Pyorrhœa.

I case was diagnosed Erysipelas in Manchester Children's Hospital, Pendlebury, and was transferred to Marland Hospital, Rochdale.

CHICKENPOX.

The majority were mild cases.

The prevalence continued throughout the year, especially Spring and Mid-Summer.

Chickenpox has been compulsorily notifiable in this area since June, 1922.

There were 382 notified cases, of which 245 occurred in the age period 5--10 years.

MEASLES.

No complicated cases were removed to hospital.

There is no record of any complicated cases being nursed by the District Nurses. .

This is to be regretted.

It is up to the Doctors to recommend skilled Nursing in Complicated cases.

Serum treatment has not been used.

The difficulty in dealing administratively with Measles in this area is that in the majority the Doctor is not called in and then only in severe or complicated forms.

Measles is non-notifiable. 8 cases were notified voluntarily, 234 cases were discovered and followed up.

Hospital treatment of complicated cases of measles is arranged for through Marland Hospital, provided there is available accommodation at the time.

I death occurred.

PNEUMONIA.

32 cases were received compared with 44 the previous year.

Age	Seasonal	Ward	School
Groups.	Incidence.	Distribution.	Distribution.
Vide page	Vide page	Vide page	Vide page
83	84	85	162

18 cases of the total were fatal, of which 10 were nursed at home, and had skilled nursing attendance. 8 of the fatal cases occurred in hospital, being inward transfers.

The age groups of the fatal cases were:-

PUERPERAL FEVER AND PUERPERAL PYREXIA.

There were no notifications during the year.

CEREBRO SPINAL FEVER, ACUTE POLIOMYELITIS, ACUTE POLIO-ENCEPHALITIS, ENCEPHALITIS LETHARGICA.

No notifications were received during the year.

PEMPHIGUS NEONATORUM.



No notifications were received.

WHOOPING COUGH.

225 cases were discovered.

Seasonal Incidence.

Jan. Feb. Mar. Apr. May June July Aug. Sep. Oct. Nov. Dec. 48 27 69 31 21 4 21 2 — 2 — —

Age Groups.

OPHTHALMIA NEONATORUM.

I notification was received. The case was treated in hospital.

Inflammation of the eyes was investigated in 6 cases. There were no after effects from this condition.

INFECTIOUS CASES COMPLICATED BY A SURGICAL CONDITION REQUIRING OPERATION.

The agreement relating to Marland Hospital covers these cases. A panel of surgeons takes duty in rotation at the hospital, and the fees charged for surgical operations range from 2 to 10 guineas.

Overcrowding in Infectious Diseases during 1936.

19 houses out of 411 giving a percentage of 4.62, were reported overcrowded during the year. This gives 7.8 persons per house, and 3.4 per bedroom.

			6)	
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oital.	1	32	26 4	63
Hospita	Total Deaths.		4 8 - 4 %	30
	65 & Over.			3
	.6964		~	5
	.24—25	-	-	4
	.2635.	^	7 6 1 1 2 1 1 2 1 1 2 1 1	4
IED	.02—20.	-	5	8
NOTIFIED	. 5 1 0 1	9	8	36
N S	.01—6	21	2 2 45	283
CASES	·5—4	5	w 2	53
	.46	1*		36
TOTAL	.6—2		- - 5	23
	1—2.	11	- 2	6-
	Under 1.		4 - 0	91
	Total cases at All Ages.	148	26 31 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	500
	"Notifiable" Discases.	Scarlet Fever		Totals 500

*Combined case—Scarlet Fever and Chickenpox

9
1936
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7
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enc
Incidence
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W 1

5	33		6	1	_	_	91		1			1	35
2	_	1	-				4		1		7	1	10
2		1	7	1			1		1		3	_	8
4	4		7				4		1			_	25
3	5		_			1	99	1			7		67
1	_	1			1	1	40	1	_		4	_	47
3	_	ļ	3		1	1	4	1	1		1		=
4	7	1	7				5	\sim	1		3	-	20
9	4		33			_	39	_	1		_	-	56
2	\mathcal{C}		7		1		92	33	1		2	3	0.7
7	-	1	7		1	1	72				7		84
10	_	1	5		1		40	_			_	_	59
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Scarl	Diph	Enter	Pneu	Puer	Opht	Erysi	Chick	Meas	Germ	Tube	Pu	No	
	Scarlet Fever 10 7 2 6 4 3 — 3 4 2 2 5	Scarlet Fever	Scarlet Fever	10 7 2 6 4 3 1 1 3 4 2 1 5 2 2 3 2 3		10 7 2 6 4 3 — 3 4 2 1 1 3 4 2 1 1 5 4 — 5 2 2 3 2 3 — 1 2 2 5 2 — — — — — — — — — — — — — — — — — —	10 7 2 6 4 3 — 3 4 2 1 1 3 4 2 1 1 5 4 — — — — — — — — — — — — — — — — — —	10 7 2 6 4 3 — 3 4 2 1 1 3 4 2 1 1 5 4 — 5 2 2 3 2 3 — 1 2 2 atorum — — — — — — — — — — — — — 40 72 92 39 5 4 40 56 14 —	10 7 2 6 4 3 — 3 4 2 1 1 3 4 2 1 1 5 4 — — — — — — — — — — — — — — — — — —				10 7 2 6 4 3 — 3 4 2 1 1 3 4 2 1 1 5 4 — 5 2 2 3 2 3 — 1 2 2 atorum — — — — — — — — — — — 40 72 92 39 5 4 40 56 14 — 1 2 2 1 3 — 4 2 — 3 1 2 2 1 3 — 4 2 — 3 1 2 2 1 3 — 4 5 — 3

Z.

Ward Distribution, 1936.

				ļ			
	North.	Central.	South.	East.	Parkfield.	West.	lotal.
Scarlet Fever	13	3	5	15	9	9	48
Diphtheria	=	3	2	3	9	_	26
Preumonia	5	9	5	6	5	2	32
Puerperal Pyrexia	1	l	1	1	1		1
Ophthalmia Neonatorum	1	1	1	-	1		_
Erysipelas	l	1	_	1	1	_	2
Chickenpox	89	99	29	61	=	40	382
Measles	-	١	8	1	1		80
German Measles	1	I	_		1	1	_
Tuberculosis—							
Pulmonary	4	4	9	4	_	-	20
Non-Pulmonary	-	_	2	2	2	_	6
Total	123	73	97	53	131,	52	529

Incidence of years.	Notifia	able Infe	ctious D	isease	es during	g pag-8
3	1929	1930 193	31 1932	1933	1934 19	35 1936
Total number	•					
notified	504	416 50	01 465	261	396 5	23 529
Removed to						
Hospital	69	117 14	19 175	81	99	85 81
Deaths	99	57	95 72	65	50	49 51
Seasonal Incid	lence.					
					er	er er
January February	~			٠ <u>٠</u>	September October	November
ıua	rch	ri: v	g g	gus	Septemb October	ver
January Februar	March	April May	June July	August	Ser	No De
1927 38 27	32	18 21	21 26	9	19 16	25 43
1928 42 14	25	29 23	8 20	23	26 44	70 124
1929 68 67	30	34 44	34 49	17	13 12	38 98
1930 66 27	40	37 47	28 18	26	16 41	39 31
1931 30 22	61	51 66	14 33	29	30 54	80 31
1932 35 35	53	64 70	37 31	29	30 22	28 31
1933 37 26	36	13 17	13 4	6	11 20	36 42
1934 31 29	27	22 20	26 19	15	18 29	34 126
1935 92 50	34	40 114	36 20	12	15 56	36 18
1936 59 84	107	56 20	11 47	67	25 8	10 35
Ward Distribu	ition.					
	N.	C.	S.	E.	P.	W.
1927	52	42	64	52	51	34
1928	103	69	104	35	54	83
1929	103	94	84	110	51	62
1930	90	62	109	77	42	36
1931	79	7 9	90	53	88	112
1932	101	70	93	88	69	44
1933	47	26	61	76	29	22
1934	92	69	86	48	49	52
1935	87	59	86	145	53	93
1936	123	73	97	53	131	52

Diphtheria Antitoxin is held on charge at the Health Office and Police Station. The following has been the expenditure during:—									
1929 1	930	1931	1932	1933	1934	1935	1936		
2,000 units 10	11	20	19	13		_	2		
4,000 ,, 46	37	77	67	25	13	20	12		
8,000 ,, —	_	_		30			24		
Datama Car		: S	المات	F 1	h .		ممالم		
Return Cas	ies oi	o Sca	riet i	rever	nave be	en not	ed as		
	930	1931	1932	1933	1934	1935	1936		
Cases 1							2		
- Cabbb 711 7	·	·	·	·		·			
Pneumonia,			-	_	and Ti	ench	Fever		
Regulations.						•			
			31 19	32 193	33 1934	1935			
Pneumonia 1			08	58	64 34	44	32		
Malaria		_	_				_		
Dysentery Trench Fever	_ [_	_ :					
Trenen rever									
Bacteriologi	cal In	vestig	ations	s. S _I	oecimen	s exan	nined:		
(a) At the	Publi	іс Неа	alth L	aborat	ory, Ma	inchest	er:		
19	29 19	30 19	31 19	32 193	33 1934	1935	1936		
Diphtheria +	7	8	23	36	21 9	8	20		
	28 4	14	31 1	69 1	40 68	61	130		
Typhoid									
(blood) +	2	2	1						
Sputum +			1	1 .		- 2			
—	1 -	_		i	1 -		1		
Ringworm +		_	_	— -		_	_		

(b)	At the	T.	B. La	aborat	ory, A	Ashtor	n-unde	er-Lyn	e:
			1930	1931	1932	1933	1934	1935	1936
·Sputum a	.nd								
Urine		+	34	27	28	17	27	22	22
		—	66	69	64	51	62	74	60

Total Examinations of Bacteriological Specimens:

	1930	1931	1932	1933	1934	1935	1936
(a)	 55	56	207	165	77	72	151
(b)	 100	96	92	68	89	96	82

Vaccination.

The following are the Returns of the Vaccination Officer for the periods stated:—

1930	1931	1932	1933	1934	1935	1936
Number of Births re-						
turned in Birth List 433	375	397	374	349	348	364
Number suc- cessfully						
vaccinated 97	83	60	83	55	96	72
Insusceptible						
to vaccina-	0					
tion —	2		_			
Number of						
Statutory						
Declarations						
of Conscien-						
tious Objection						
received 282	250	249	255	269	229	265
Died Unvaccin-						
ated 18	30	31	18	10	8	12

		1930	1931	1932	1933	1934	1935	1936
Postponer	ment							
by Me	edical							
Certifica	te	. 4	4	5	7	7	7	6
Left Dist	rict	12	4	4	5	4	8	9
Not acco	unted							
for		. —	2	48	6	4	_	_
		%	%	%	%	%	%	%
Percentag	ge of							
Vaccina	tions							
to Birt	ths	22.40	22.13	15.11	22.19	15.75	27.58	19.78
		%	%	%	%	%	%	%
Percentag	e of							
Objectio	ns							
to Bir	ths	65.13	66.67	62.72	68.19	77.07	65.80	72.80

Public Health (Smallpox Prevention) Regulations, 1917.

No Vaccinations performed by the Medical Officer of Health during the year.

Non-Notifiable Acute Infectious Diseases.

The following cases were discovered and followed up during the year:—

	First	Subsequent
	Visits	Visits
Measles	234	8
Whooping Cough	225	25
Influenza	2	_
Diarrhœa	16.	

INFLUENZA.

There was a prevalence at the beginning of the year.

3 deaths were recorded.

The type manifested in December was characterized by Headache, Eye Pains, Backache, Hoarseness, and Catarrh, with a temperature of 102° and over.

Propaganda was extensively carried out in the form of pamphleteering, reference during Health Week, and the distribution of a Poster to Works, etc.

An Article appeared in the Personal Health Magazine.

Influenza.

Mortality from Influenza.

	1929	1930	1931	1932	1933	1934	1935	1936
Deaths	41	3	13	5	16	3	7	3
Sex: Male	18	2	6	5	8	2	7	2
Female	23	1	7	_	8	1	_	1

Seasonal Incidence.

	1929	1930	1931	1932	1933	1934	1935	1936
January	2	_	_	2	7	1	_	1
February	25	_	1	_	6	_	_	
March	11	_	3	1	2	_	1	1
April	1	—	5	1	_	_	3	_
May	—	_	1	_	_	_	1	1
June	1	_	_	_	_	_		_
July		_	_		_	1	_	
August		_	_		_	_	_	
September	—	_	1	_		_	_	
October		1	_				_	
November		1	—	1		_	_	
December	1	1	2		1	1	2	

Other Diseases.

Tonsillitis in children was discovered and followed up in 10 cases.

None of these cases was reported by Doctors as Infectious.

Bronchitis in children came under review in 58 cases. and 3 re-visits were made.

No cases of Anthrax, Epidemic Jaundice nor Psittacesis were reported.

CANCER.

The facilities available for the Diagnosis and Treatment of Cancer in this area are the Manchester and Salford Hospitals, especially the Christie Hospital for Cancer.

The Medical Officer of Health is informed of the proceedings of the Manchester Research Committee.

Propaganda is carried out by means of Lectures and printed pamphlets, and pamphlets are distributed at the Clinics to parents, and supplies are issued during Health Week.

The subject is referred to in Health Week Programmes each year and emphasis directed to early treatment.

The Middleton Personal Health Association has arranged in its next year's programme a Cancer Campaign.

Cancer Deaths, 1936.

			Ages					Wards			
			25	45	65						
Part Affected	M.	F.	to	to	and	N.	C.	S.	E.	Р.	W.
			45	65	over						
Gastro-											
Intestinal	16	16	4	14	14	7	2	4	8	2	9
Breast	- 1	3	—	3	1	—	—	2	1	1	—
Uterine	—	4	_	3	1	—	1		2	1	—
Urinary System		1			- 1		— .	—	1	—	_
Lung	4	1		5	_	2	1 -	_	2	_	_

		Ages						Wards T			-
			25	45	65						
Part Affected	Μ.	F.	to	to	and	N.	C.	S.	E.	P. '	W.
					over						
Larynx	2	_	_	—	2	—	}	1			
Bronchus					—				}	—	—
Oesophagus	2		—	—	2	1	—		—	—	- 1
Thyroid Gland	}	—	—	1	_	_	1	—	—		—
Mediastinum		1		1	—	—	—		—	}	—
Skin	}	—	_	1	_		—	1	—	—	—
Total	28	26	4	29	21	10	6	8	15	5	10

The number of Deaths from Cancer during the past seven years has been:—

Disinfection.

Hypochlorite Fluid is manufactured by means of a Mather and Platt Electrolyser.

lotal quantit	y manutao	${\sf ctur}\epsilon$	ed du	ring t	he		
year .						910	gallons
Used by the	Public Ba	ths				136	, ,
,,	Clinics					19	,,
,,	Schools					471	,,
1,	Public						
9 9	Police					5	, ,
, ,	Middleto	n	Ju	nctio	n		
	Read	ling	Roon	n an	d		
	Clini	c				55	,,
, ,	Central (Con	venie	nces		4	,,

Number of houses disinfected during the year was 106, by Formaldehyde and Sulphur Fumigation.

Houses are disinfected after T.B. Pulmonary deaths.

The number of articles of clothing, etc., disinfected was 4,783, by means of a Thresh Steam Disinfector.

Disinfestation was carried out in 26 houses.

The Cyanide process is carried out in houses infested with Bugs. (Vide page 51).

There are no arrangements for bathing Verminous persons.

Animal and Insect Pests.

A public press notice was issued under the Rats Destruction Act.

Pamphlets on the Fly Nuisance are issued liberally at the Clinics, and stress given to the inspection of Manure Dumps.

Napthalene is issued free of charge at the Clinic.

TUBERCULOSIS.

Notification of Tuberculosis.

Attention is drawn to Article V. of the Tuberculosis Regulations:—"Subject to the Provisions of these Regulations, every Medical Practitioner (unless acting as a School Medical Inspector) attending on or called in to visit any person (whether at an Institution or otherwise) shall, within forty-eight hours after first becoming aware that such person is suffering from Tuberculosis, make and sign a notification of the case in 'Form A,' and shall transmit the notification to the Medical Officer of Health for the district within which the place of residence of the person is situate at the date of notification."

Notifications.							<u>v=4</u>
	1930	1931	1932	1933	1934	1935	1936
Pulmonary:							
Male	14	9	13		10	15	13
Female	16	7	7	6	8	4	7
Non-Pulmonary:							
Male	5	4	7	7	6	4	3
Female	10	7	4	10	4	7	6

Date of Notification before Death.

			1	930	1931	1932	1933	1934	1935	1936
Death	n	befo	re							
noti	ficati	ion .			_	—	_		_	_
Less	tha	an or	ne							
mon	th b	efore	death	3	2	4	2	4	3	2
Ditto	2 :	month	s	2	_	_	1	_		2
Ditto	3	,,		_	_	-	1	_		2
Ditto	4	,,		2	1	_	1	_	2	_
Ditto	5	,,		—	—	- 1	_	_		2
Ditto	6	,,		1	1	1	1	3	_	_
Over	6 n	nonths		2	_	_	1	—	_	_

New Cases and Deaths during 1936.

			New Cases					Deaths		
			Non-					Non-		
		Pulm	Pulmonary Pulmonary Pulmona					Pulm	onary	
Year	s	M.	F.	M.	F.	M.	F.	M.	F.	
0-1		—	—	_		—	_	_	_	
1-5		—	_		2		_	_	- 1	
5-10			1	1	—			_	1	
10-15		_		1	_		_	_		
15-20		1	1	1	1	—	_	_	_	
20-25		_	2		—	_	1		1	
25-35	, . ,	5	3		- 1	3	2			

			New Cases				Deaths			
				Non-				Non-		
		Pulm	onary	Pulmo	nary	Pulm	onary	Pulm	onary	
Years		M.	F.	M.	F.	M.	F.	M.	F.	
35-45		2			—	4		_	—	
45-55		_				2		_	—	
55-65		4	-		1	3	-		—	
65 & up	wards	1	_	-	1	1	1		1	
		13	7	3	6	13	4	_	4	

During Past Nine Years.

		New Cases						Deaths		
				No	n-			No	n-	
	Pul	mona	ry Pu	ılmon	ary P	ulmo	nary	Pulmonary		
		M.	F.	M.	F.	M.	F.	M.	F.	
1928		9	6	3	3	14	5	3		
1929		10	9	6	3	11	9	4	2	
1930		14	16	5	10	5	14	2	_	
1931		9	7	4	7	10	6	2	2	
1932		13	7	7	4	9	6	2	3	
1933		10	8	8	10	8	8	1	1	
1934		11	9	6	, 6	4	7	2	1	
1935		16	5	4	8	12	10	2	2	
1936		13	7	3	6	13	4		4	

Report of Tuberculosis Officer for the year 1936.

During the year 1936, 28 notifications of patients suffering from Tuberculosis were received. Of these, 19 were notified as suffering from Tuberculosis of the lungs, and 9 from Non-pulmonary Tuberculosis.

Of the 19 Pulmonary cases, 15 were found to have tubercle bacilli in the sputum, 1 had negative sputum, and 2 had no sputum. In Union Hospital or Institution, 0 In I case the sputum was not examined.

The 9 Non-pulmonary cases are classified as foll, ws:

Glands	 	3	Hip	 -1
Skin	 	ľ	Cæcum	 - 1
Spine	 	1	Abdomen	 -1
	Men	inges		

II of the notified cases died during the year () pulmonary, 2 non-pulmonary).

23 of the 28 cases applied for treatment. In the remaining 5 cases, no application was made for the following reasons:—Died immediately after notification (3), in Union prospital (—), refused to apply (1), no action necessary (—), in Institutions (—), diagnosis not confirmed after examination (—), removal from district (—), in Asylum (1).

Of the patients who applied for treatment, 4 were sent to Sanatoria, 8 to Pulmonary Hospital for advanced cases, 1 to General Hospital, 1 to Skin Hospital, 3 to Orthopædic Hospital. The remaining 6 cases were under Dispensary supervision only.

In addition to the notified cases, a number of patients are sent to the Dispensary for diagnosis. During the year 1936, 55 new cases were sent for diagnosis by the doctors, School Medical Officers, etc. The number of re-attendances of old patients at the Dispensary for supervision and arrangements for treatment was 335.

Special enquiries are made as to the health of other inmates of the house where there are patients suffering from definite Tuberculosis, and 33 of these contacts were examined during the year.

In supervision and visiting, special attention is paid to the open cases. i.e., cases where tubercle bacilli are present or have been found in the sputum. On the 1st January, 1936, there were 36 such cases known to be living in the Borough. On the 31st December, 1936, there were 32 positive cases living. These figures include quiescent and arrested cases.

13 of the positive cases died during the year.

3 of the positive cases removed from the district during the year.

The condition as to isolation of the positive cases was as follows:—

Separate room		• • •		• • •	 33
Separate bed			• • •		 10
Unable to have	e sep	arate	bed		 6

19 of the positive cases were in Institutions for treatment and isolation at some time during the year.

The number of positive cases living at 31st December. 1936, who had tubercle bacilli in the sputum during 1936, was 12. The other 20 cases had either negative or no sputum.

Of the 12 cases who had tubercle bacilli in the sputum during 1936, 7 had separate bedroom, 3 had separate bed, and 2 were in institution at the end of the year.

9 housing defects were reported during the year. Of these 3 had been remedied by the end of the year.

82 specimens of sputum were examined at the Ashton Laboratory during the year. Of these, 22 were positive, and 60 were negative.

During the year, 21 cases were discharged from Institution, as follows:—

From	Sanatoria	8
,,	Pulmonary Hospital for advanced cases	8
,,	General Hospital	2
,,	Orthopædic Institution	3
,,	Non-Pulmonary Sanatoria	_
,,	Skin Hospital	

The resul	ts on	discl	narge	were	as f	ollow	s:	-in	
Quiesce	ent or	arre	sted	• • •					5
lmprov	ed	• • •	• • •	• • •		• • •	• • •	• • •	9
Worse		• • •							2
Died	• • •			• • •			• • •	• • •	3
I.S.Q.			• • •	• • •	• • •		• • •		2
Diagno	sis n	ot o	confir	med					

During the year 1936, there were 4 deaths from Tuberculosis where the case had not been notified previously.

G. FLETCHER, Consultant Tuberculosis Officer.

T.B. CASES ATTENDING AT ASHTON-UNDER-LYNE.

A question was raised in Committee during the year as to the reason of Middleton cases attending Ashton-under-Lyne Chief Dispensary.

This is explained by the Area Tuberculosis Officer as follows:—

"The cases are dealt with at Middleton Dispensary. They attend at Ashton-under-Lyne for specialist treatment, such as Light Treatment, Artificial Pneumotherax and X-ray Examination. This applies to all cases attending dispensaries other than our chief dispensary at Ashton-under-Lyne."

PUBLIC HEALTH ACT, 1925, SECTION 62. No case has been dealt with under this section.

VENEREAL DISEASES. See page (32).

A Notice is fixed in the Public Conveniences as follows:—

VENEREAL DISEASES.

FREE TREATMENT OF SYPHILIS AND GONORRHŒA.

(Pox)

Venereal Diseases, unless promptly treated, may lead to Insanity, Blindness, Stricture, Paralysis, or Premature Death. Syphilis is among the chief of the "Killing Diseases."

(Clap)

Those who have any suspicious sore or discharge, should see a doctor at once. Even if there are no symptoms but a risk of infection has been taken, go for preventive treatment.

DELAY IS DANGEROUS.

Every day of neglect the disease gets a firmer grip. It is sheer madness to put off treatment. The Government, recognising the peril, has provided free treatment for all, men, women and children, under the seal of absolute secrecy. If treated early these terrible diseases can be cured. Hesitation, false shame, self-drugging or delay may mean a lifetime of suffering or an early death. Those who suspect infection should therefore

GO TO A DOCTOR OR HOSPITAL AT ONCE.

(issued by the British Social Hygiene Council, Inc., Carteret House, Carteret Street, London, S.W. I.) Full particulars regarding Special Treatment Centres can be obtained from:—

> The Medical Officer of Health, Health Centre, Middleton.

SECTION VII.



MATERNITY AND CHILD WELFARE.

A. MATERNITY AND CHILD WELFARE STATISTICS FOR THE YEAR 1936.

	Rates per	1,000 L	ive Births
	Middleton	Englan	d & Wales
Deaths under one year			
of age	52		59
Deaths from Diarrhoea			
and Enteritis under 2			
years of age	9.5		5.9
Maternal Mortality.			
Puerperal Sepsis	Nil		1.40
Others	Nil		2.41
Total	Nil	• • •	3.81
Rates per 1,000	Total Births	(i.e. Live	e and Still)
Notifications.			
Puerperal fever	Nil		3.27
Puerperal pyrexia	Nil	•••	9.64

1. BIRTHS.

Births notified under the Notification of Births

(a) Live Births 343
(b) Stillbirths 8
(c) Total 351
(d) By Midwives 344
(e) By Doctors and Parents 7
Failure to Notify 2.

NON-NOTIFICATION OF BIRTH.

The following extract from the Notification of Births Act, 1907:—

"It shall be the duty of the father of the child, if he is actually residing in the house where the birth takes place,

to give notice of the birth to the Medical Officer of Health of the district, within 36 hours of such birth, either at his residence or at this Office.

Any person who fails to give notice of a birth in accordance with this Section, shall be liable on Summary conviction to a penalty not exceeding 20s.

This Act applies to every child born after the 28th week of pregnancy whether alive or dead."

is brought to the Notice of Mothers and Midwives.

Non-notification occurred in 2 cases. The father in each case was written, and action taken by the Health Committee.

2. HEALTH VISITORS.

Number of Home Visits made by the Health Visitors:—

(a) To Expectant Mothers	First	Visits	61
	Total	Visits	199
(b) To Post-Natal Mothers	Total	Visits	413
(c) To Children under 1 year of age	First	Visits	432
	Total	Visits	1,625
(d) To Children between the ages of			
l and 5 years	Total	Visits	3,116

3. WELFARE CENTRES.

(a) No. of Attendances at the Centres-

			D	urnford	Middleton	
			D			
					Junction	
(1)	Children	under	l year	2,019	557	2,576
(2)	Children	15 y	ears	2,765	840	3,605
(b) N	o. of Chile	dren at	tending	for the fi	rst time—	
(1)	Children	under	l year		• • • • • •	170
(2)	Children	15	vears			63

(c) Ante-Natal-

(C) Alic-Ivatal
No. of Attendances of Expectant Mothers at Ante-Natal Clinic 136
No. of Attendances of Expectant Mothers at Welfare Centres 293
No. of Expectant Mothers attending 110
Percentage to notified Births for the year 31.34%
(d) Post Natal—
No. of Attendances of Post-Natal Mothers at Ante-Natal Clinic 12
No. of Post-Natal Mothers attending 10
Percentage to notified Births for the year 2.85%
4. MATERNITY HOME (Wardeley).
Notification of Births received—9 Local, 14 Transfers.
5. NO. OF CASES ATTENDED BY MIDWIVES DURING THE YEAR.
(a) As Midwife 294 (b) As Nurse 81
6. MATERNAL DEATHS.
At In
Home Institutions
(a) From Sepsis — —
(b) From other causes — —
7. HOUSING.
(a) Overcrowding in
Occupants Bedrooms Houses
Maternity Cases
Homes with chil-
dren under 1 year > 126 50 15 Homes with chil-
dren 1—5 years

(Sanitary Defects found in												
	(1)	• • • • • •	• •••	• • •	• • • • • • • • • • • • • • • • • • • •		. 5					
	(2)	• • • • • •	• •••	• • •	• • • • •	• • • •	48					
	(3)	• • • • • • • • • • • • • • • • • • • •	• •••	•••			.))					
8.	. CASES OF OPHTHALMIA NEONATORUM NOTIFIED.											
	At Home	• • • • • • • • • • • • • • • • • • • •					. 1					
	In Hospi			• • •	•••		. —					
	Inflammati	on of	Lyes	• • •	• • • • • •	• • • • •	. 6					
9.	9. INFECTIOUS DISEASES.											
Not	ifiable.		Years									
		Unde	r				Total					
		1	12	23	34	45						
	rlet Fever	_	7	5	12							
			1	1		3	5					
	eumonia	4 9	2 15	21	3 25	5 38	15 108					
	ckenpox asles	2	1)	<u> </u>	<i>25</i> 1	2	6					
Measles 2 1 — 1 2 Ophthalmia Neonatorum 1 — — — —												
Non-Pulm. Tuberculosis — — — 1												
				Years	3							
		Unde	r				Total					
		1	12	23	34	45						
Non-Notifiable (discovered).												
Me	asles	14	30	37	36	28	145					
	ooping Cough .		39	37	29	26						
		20	17	9	9	3	58					
	ncho Pneumon		1		1		3					
	,	<u> </u>	2 4	2	4 2	2	10 16					
	eumonia	4	_	1		1	5					
	uenza	1	1				2					
	rman Measles	1	1			_	2					

10. HOSPITAL.

CT

	Sick children recommended Hospital Treatment 10 Infectious Diseases removed to Hospital 13											
11.	CLINIC TREATM	TMENT. Attendances										
	Sunlight Clinic Dental Clinic Ophthalmic Cl Minor Ailments Remedial Clinic	linic				1-5 ye 629 22 28 169 346	ears					
12.	MEDICAL INSPE	CTION	of Too	ddlers,	l-5 yea	ars	590					
13.	CRIPPLING CO	NDITIC	NS FC	OUND	•••		5					
14.	CHILDREN ACT	Γ, 1908	3.									
	Removed from On Register New Cases Register Remaining 6 3 2 7											
15.	DEATHS.											
		l-5 years										
Pne fo Dip Tub	Cause. asles	M	F. - 3 -	-2 2-3 - — 3 — - —	3-4 4	-5 T	otal 3					
	_	3	3	3 —	1	2	6					

B. GENERAL ARRANGEMENTS.

- (1) Full reports on the work are submitted to the Maternity and Child Welfare Committee each month.
- (2) The organization of the work remains the same as reported previously.
- (3) The number of sessions held during the year was 102, with a total attendance of 6,610.
 - (4) Consultations by the Medical Officer.

Consultations by the Medical Offi	cer	
numbered	• • •	1,185
Cases showing: No defects	•••	140
One defect	•••	210
More than one defect		103

Classification of Ailments.

				Per Cent
Nutritional		• • •	• • •	3.53
Gastro-Intestinal				31.79
Respiratory	• • •		• • •	5.30
Nose and Throat	• • •		• • •	10.15
Nervous			• • •	2.43
Eye				5.08
Ear	• • •		• • •	2.87
Skin	• • •			11.48
Infectious		• • •		.66
General	• • •	• • •		25.61

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DEFECTS IN CHILDREN ATTENDING THE WELFARE CENTRES DURING THE PAST 10 YEARS.

_													
General	%	26.63	19.49	18.33	20.95	25.95	23.13	23.33	21.77	21.89	21.77	223.24	22.3
Infecti- ous	9/	1.18	1.13	96.	= :	.25	.45	68.	.65	.46	.23	7.31	7.
Skin	² 0/	13.61	9.32	9.0	8.94	17.81	11.79	13.33	10.34	8.30	9.57	112.01	11.2
Ear	² ° ′	3.25	3.67	4.50	3.63	2.80	3.63	5.11	4.09	4.15	2.15	36.98	3.7
Eye	32	7.69	4.52	4.50	5.59	5.09	5.44	5.78	5.17	6.45	6.94	57.17	5.7
Nerv-	0/	4.44	5.69	5.14	6.43	5.85	4.31	6.22	3.02	1.38	3.59	46.07	4.6
Nose and Throat	30	13.02	13.28	9.65	11.45	13.74	12.24		5.82	6.45	6.70	103.46	10.3
Respira- tory	%	20.41	19.49	16.72	13.13	16.54	13.83	13.78	14.66	12.21	10.53	151.30	15.1
Gastro- Intes- tinal	\% \%	28.7	38.14	30.87	27.65	34.35	32.2	35.11	27.37	33.41	33.98	321.78	32.2
Nutri- tional	3%	15.38	121.71	22.19	13.13	16.28	17.23	- 4.	12.72	12.21	9.33	145.18	14.5
		:	:	:	:	:	:	:	:	:	: ,		:
Year		1926	1927	1928	1929	1930	1931	1932	1933	1934	1935		Average

Maternity Homes and Hospitals available.

There is one private Maternity Home in the Area. Number of Beds, 5. Total cases admitted during the year 23.

Maternity Hospital accommodation is available at Boundary Park, Oldham, and on payment only at Crumpsall Infirmary and Birch Hill, Rochdale, by private engagement beforehand by the Expectant Mother.

Institutional Provision for Unmarried Mothers, Illegitimate Infants, Homeless Children, Sick and Ailing Children and Mental Defectives is available through the Oldham Municipal Hospital. There is no special provision made by the Local Authority.

(6) There were no Investigations of Maternal Deaths in accordance with Circular 1285 during the year.

(7) Ante-Natal Work.

110 Expectant Mothers attended during the year, making a total of 429 attendances.

(8) Supplies of Milk and Expenditure on Dried Milks.

Number of cases provided with free milk during:

Cost-

1926-1927 1927-1928 1928-1929 1929-1930 1930-1931 £ s. d. 80 16 9 36 4 10 23 1 7 41 1 3 69 19 8 1931-1932 1932-1933 1933-1934 1934-1935 1935-1 86 £ s. d. 71 3 7 108 10 5 136 12 11 135 11 3 159 1 1

Income of family in 1936 cases:

Under 5s. 5s. to 10s. 10s. to 12s. 6d. per head 40 109 2

Period for which free milk was provided:

Milk Scale for Necessitous Cases.

Scale of Income per head of family after deducting Rent.

Number in	Supply of Milk free of	Supply of Milk at quarter	Supply of Mill at half		
Family	cost	cost	cost		
	per week	per week	per week		
2	12s. 6d.	13s. 0d.	13s. 6d.		
3	10s. 0d.	10s. 6d.	11s. 0d.		
4	8s. 6d.	9s. 0d.	9s. 6d.		
5	7s. 6d.	8s. 0d.	8s. 6d.		
6	7s. 0d.	7s. 6d.	8s. 0d.		

(9) Orthopaedic Treatment.

The number of Pre-School Children under treatment at the Remedial Clinic during the year was 37, making 346 attendances.

(Vide page 174 for details of cases.)

(10) Public Health (Puerperal Fever & Puerperal Pyrexia Regulations.)

Same arrangements hold as previously reported (vide page 99, Annual Report, 1932).

(Prevention of Blindness.

On Notification of Ophthalmia Neonatorum following up by the Health Visitors is carried out and reports made to the County Medical Officer.

Instructions with regard to the Certification of Blindness are contained in Circulars 1353 and 1431, October, 1933, issued by the Ministry of Health.

The Report with Certificate for Admission to the Register of Blind Persons is drawn up on Form 37d Board of Education.

(12) Educational Facilities.

Educational facilities for Mothers are carried out in the Welfare Centres by personal and collective instruction, pamphlets and booklets on Child Welfare are given free and on payment.

The preparation of the pamphlet on the Objects and Uses of the Middleton Clinics (which is reproduced at pages 133—137) gave emphasis to the Maternity and Child Welfare provisions for Mothers and Young Children.

(13) Mothers' Cookery Class.

l recommended during the year that a Mothers' Cookery Class be held at the Health Centre.

Your Committee favoured the attendance of Mothers at the Weekly Cookery Demonstrations held at the Gas Department Showrooms.

(14) Competitions.

The Competitions entered into by the Mothers during Health Week were taken up enthusiastically by the mothers, and the standard shown was high.

The Competitions comprised Six Classes.

436 Class 1.

> I. Why should an Expectant Mother attend the Ante-Natal Clinic? 2. At what age do most babies under I year old die, and why? 3. Why is Breast Feeding better than Bottle Feeding? 4. What are the causes of Rickets and how can Rickets be prevented? 5. Why should Toddlers attend the Welfare Centres?

Class 2.

1. How can a Toddler's Teeth be prevented from going bad? 2. What are the most essential foods for a Toddler?

3. What Food Habits should a Toddler be taught? 4. What is a Nursery Class for? 5. How would you teach a Toddler Habits of Cleanliness?

Class 3.

1. How would you spend a £1 in buying foods o get the best food values—give prices. 2. How should (1) Milk, (2) Cheese, (3) Butter, (4) Vegetables, and (5) Fish be stored in the house? 3. Describe how to make a good nourishing Soup? 4. Name foods containing Vitamin A, Vitamin B, Vitamin C. 5. How would you cook a good dinner-give ingredients?

Class 4.

What are the uses of the following Clinics:-

- (1) Remedial Clinic (2) Sunlight Clinic
- (3) Dental Clinic
- (4) Eve Clinic
- (5) Minor Ailments Clinic

Class 5.

Prepare for Exhibit.

1. A Baby's knitted body belt. 2. A Health Poster made from cuttings (from pamphlets, newspapers, magazines, etc.). 3. A cooked meal for a 134

Toddler of 2 years of age. 3. A child's mended article of clothing. 5. A child's shoes mended by the father.

Class 6.

Practical Tests at the Clinics.

1. (a) Read the Clinical Thermometer. (b) Take the room temperature. 2. Apply a First Aid Dressing to a wound on the child's knee. 3. Take the weight of (a) Baby, of a (b) School Child and compare them with the standard weights. 4 Make a temporary cot for a baby, using 2 chairs. 5. Demonstrate how to sweep and dust a room.

A Silver Cup, "The Clinic Mothers' Jubilee Cup," was awarded by me for Annual Competition.

The result of the Competitions this year:—The Cup was won by East Ward (Middleton Junction Centre). Health Visitor in charge—Nurse Anson.

The following Competitions were entered into during the year:—

"National Parentcraft Competitions," and the results gained included:—

Durnford Street Clinic. Middleton Junction Clinic.

Honours Certificates ... 3 Honours Certificates 2
First Class Certificates 4 First Class Certificates 5
Second Class Certificate 1 Second Class Certificates 2

Nurses Anson and Harrison entered the National Parentcraft Competitions with their Centre, and received Honours Certificates for essays written on Mothercraft Teaching.

Baby Week was held during Health Week and comprised Practical Competitions (Oral and Written), Cinema Meetings, etc.

C. INVESTIGATION.

(1) Maternal Mortality.—Nil.

Confidential Reports are forwarded to the Ministry of Health on these cases in accordance with Circular 1285. 164/Med. as required.

(2) Still Births.

There were 14 infants born dead during the year. The Still-birth rate is thus 3.37% of registered live births during the year, as compared with 6.76% last year.

Investigation of cases of Still-births:

	Under			
Age of Parents	20	20-30	30-40	Over 40
Mother		40.		— per cent.
Father		44.44	33.33	22.22 ,,

Previous Health of Mother reported good in 100%.

Number of Previous Pregnancies.

:	1 40.	2	3	4	5	6	Over	6
	40.						— per	cent.

Previous miscarriages in — per cent.

Previous stillbirths in 10 per cent.

Children dying under I year in - per cent.

(3) Infantile Mortality.

The number of infants dying under I year, during the last nine years:—

The number under one month:-

1928 1929 1930 1931 1932 1933 1934 1935 1936 16 15 15 17 20 14 11 10 13

The combined loss from Still-births and Deaths under one month:—

Cases of Infantile Deaths.

Number: (1) Legitimate, 22; (2) Illegitimate, —; (3) Total, 22.

Rate per 1,000 births: (1) Legitimate, 52; (2) Illegitimate, —; (3) Total, 52.

Statistics this year again bring to light the high percentage of Neo-natal Deaths, 59.09% of the deaths of infants occurred under 1 month, compared with 76.92% last year, as follows:—

 Premature Births
 ...
 54.55%

 Diarrhœa and Enteritis
 ...
 4.54%

 Congenital Debility
 ...
 —

 Other Causes
 ...
 ...
 —

 59.09%

The Neo-natal Mortality Rates per 1,000 live births for the past nine years are:—

1928 1929 1930 1931 1932 1933 1934 1935 1936

Middleton

37 36 34 43 48 38 27 27 31

England and Wales

31 33 30.92 31.59 31.57 32.20 31.31 30.38 —

The Deaths of Infants under 1 month are chiefly related to Ante-natal care of the Mother.

The causes of death under 1 year show that Mortality from—

Bronchitis and	Pnet	ımor	nia an	nount	ed to	·	18.18%
Diarrhœa and	Ente	ritis	• • •	• • •	• • •		18.18%
Prematurity	• • •	•••	• • •	• • •			59.09%
Other Causes	• • •			• • •			4.55%
Infectious Dise	ases						_

INFANTILE DEATHS.

Deaths	Months	1 1-2 2-3 3-4 4-5 5-6 6-7 7-8 8-9 9-10 10-11			13		2 4	-	
		1 1-2 2-3 3-4 4.			12 1	- 	 	 - 	
Cause of Death M F			Congenital Debility,	Malformation & Pre-	mature Birth 7 6	Pneumonia (all forms) 4 —	Diarrhœa 2 2	Acute Enteritis —	



Distribution.

			N.	C.	S.	E.	P.	W.	Total
Males			3	2	4	1		3	13
Females		• • •	1	1	2	2	2	I	9
Legitimate	• • •		4	3	6	3	2	4	22
Illegitimate			_	_	—	—	_	—	_
Full Time			1	3	4	1	2	3	14
Premature			3	—	2	2		1	8

59.09% of the deaths occurred in the first month of life.

Attendance at Birth by:

Doctor in — per cent.

Midwife in 78.57 ,,

Both in 21.43 ,,

None in — ,,

Age of Mothers.

Health of Mother.

Reported good in 78.57 per cent. Not good in 21.43 per cent.

Previous Pregnancies.

Miscarriages in 7.15 per cent. of the cases.

Still-births in 7.15 per cent. of the cases.

Previous children dying under one year in 14.29 per cent. of the cases.

Weight at Birth.

System of Feeding at Birth.

Breast Bottle 54.55% 45.45%

Home Conditions.

		Economic
	Sanitary	Conditions
Overcrowding	Defects	Unsatisfactory
21.43	7.15	35.71 per cent.

Conditions During First Month.

Discontinued Breas	st Fee	eding		• • •			2
Irregular Feeding	• • •			• • •	• • •	• • •	
Illness: Baby	• • •	• • •	• • •	• • •	• • •	• • •	8
Mother	• • •	• • •	• • •				1
Attended Clinic	• • •	• • •	• • •	• • •	• • •		2
Not Attend Clinic	• • •	• • •				• • •	20

ANTE-NATAL SCHEME.

The Scheme was fully described in the Annual Report (pages 102 et seq.) of 1934.

The co-ordination of the work of the Ante-Natal Clinic with the Doctors and Midwives is the aim of the Scheme. It is suggested that full co-operation can be best effected by Doctor or Midwife recommending their own cases for special examination and, if possible, conferring with Dr. Fitzgerald on their own cases.

The provisions made in the Scheme are in accordance with the Ministry of Health's Memo. 156/M.C.W.

The attendance of mothers up to 31st December, has been 110, equal to 31.34% of notified births for the same period.

CONSULTANT MEDICAL OFFICER'S REPORT.

The Ante-Natal Clinic continues to do good work.

Many of the early attenders were prompted by curiosity, but it is now gratifying to note that so many, understanding and appreciating the objects of the Clinic, return from month to month for advice and supervision, thus enabling the true intention of the Clinic to be more fully achieved.

There have been, during the past twelve months, several cases in whom evidence of impending danger was discovered. These became regular attendants and, I am glad to say, were helped to the happy termination of their pregnancies. The advice given is, whenever possible, through the medical practitioner or midwife who is to attend the patient at her confinement, and the repeated attendances of patients is taken as evidence that the helpfulness of the Clinic is appreciated. In the majority of patients conditions are normal, and in these merely routine advice is called for. It is, however, to the small percentage where complications threatened that the Clinic has proved most helpful and, indeed, most necessary.

I have had the opportunities of discussing Ante-natal work with practically all the Midwives in the district, and am particularly pleased to know how appreciative they are of the help given at this Clinic.

(Signed)

GORDON FITZGERALD, M.D., F.C.O.G.

RECORDS.

Records are kept for each case attending and the following particulars are noted:—

- 1. History of previous Pregnancies.
- 2. Menstrual history.
- 3. Particulars of present pregnancy.

- 4. Particulars of general medical examination.
- 5. Pelvic Measurements.
- 6. Examination of Uterus and presentation.
- 7. Blood Pressure.
- 8. Urine Tests.
- 9. Bacteriological investigation and blood tests as indicated.
- Nutritional and economic conclition with requirements.

DENTAL TREATMENT.

Arrangements are provided at the Clinic for conservative Dental treatment.

MIDWIVES ACT, 1936.

This Authority, not being a Supervising Authority, is embodied in the Lancashire County Scheme.

The County is divided into 21 "Midwifery Districts" for the administration of the Act.

Middleton area is in No. 2 District as shown in this table.

		1	Number of
	Area in	Domiciliary	Salaried
	Acres	Births	Midwives
District 2			proposed
Failsworth	1,073	153	
Chadderton	3,013	213	
Middleton	5,172	286	
Royton	2,149	114	
Crompton	2,865	100	
	14,272	866	11

District on the rate of 80 cases per annum per midwife.

Middleton Births comprise 33.04% of the total Births of the District, and the Middleton Area 36.24% of the whole District. 4 Appointed Midwives will be required for the Middleton Area.

The appointments of the Salaried Midwives will be made by the County Appointment Committee from recommendations by the Local Authority.

The Local Authority will advise the County Authority the most suitable locality for the Appointed Midwife to reside.

Co-operation between the Appointed Midwives and the Maternity and Child Welfare Service will be ensured by the County Medical Officer.

The Appointed Midwives will be required to attend the Ante-Natal Clinic and copies of Reports on cases made by the Midwives to the County Medical Officer will be sent to the Local Medical Officer of Health.

At present there are 9 Midwives practising in the Middleton Area.

Those Midwives who remain in Private Practice will be subject to the same supervision by the County Supervisors as the Appointed Midwives.

This Authority has considered on previous occasions the questions of applying for supervisory powers under the Act. At this stage I submit it will be judicious to continue in the County Scheme.

BIRTH CONTROL.

It was represented during the year that a number of Middleton women attended the Crumpsall Birth Control Clinic without authority through this Department. The matter was regulated by the following Minut: -

"That the Public Health Committee of the Manchester Corporation had approved a recommendation that Middleton women attending the special obstetric clinic at Crumpsall Hospital with a signed recommendation from this Council's Ante-Natal Consultant, be given the desired advice, and that a charge of 2s. 6d. per attendance be made to this Council for such services."

INFANT LIFE PROTECTION.

The Health Visitors are appointed to act as Health Protection Visitors under the Act.

There are 7 children on the Register, 2 under 5, and 5 over 5 years of age. These children are visited periodically and reports made on the care of the children and home conditions.

The Authority of Registration is produced by the foster-mother at the inspection.

CIRCULAR 1550.

(MINISTRY OF HEALTH, 1936)

The Circular has received extended consideration during the year and as a result I was instructed to draw up a full Report on the Maternity and Child Welfare Service in accordance with Minute 2551, as follows:—

"That the Medical Officer of Health be instructed to submit to the next meeting a comprehensive Report dealing with Maternity and Child Welfare as a whole and giving details of the staff required to carry out the additional inspections and visits, and the additional estimated expense." This Report was submitted to your Committee in September and embodied 3 Sections:

- A. Statistics.
- B. Present Position and Requirements.
- C. Efficiency and Cost.

Statistics showed that (a) 83% of Expectant Mothers, 58% of Babies under I year, and 90% of Toddlers do not attend the Welfare Centres; (b) in Home Visiting 84% of Expectant Mothers are not visited. Practically all Babies and Toddlers are visited, but the average number of visits per baby is only 3.86 per annum, and per Toddler only 2.05 per annum.

73% of the Toddlers are not medically inspected.

The number of Visits to children under 5 years in the case of Infectious Diseases was 1.44 per case in Notifiable Diseases and 1 per case in Non-Notifiable Infectious Diseases.

In view of these figures I felt justified in recommending to your Committee an increase of Staff. This is dealt with in Section C of my Report, as follows:—

EFFICIENCY AND COST.

(a) The Scheme which I recommend is a partial adoption of the Huddersfield Scheme.

At Huddersfield no Health Visitors are employed.

The Maternity and Child Welfare work is done entirely by female Medical Officers.

The Medical Officer of Health, Huddersfield, informs me the main duties of the Medical Officers is Domiciliary Visiting.

The advantages accruing are:-

- (1) Superior work is done as compared with the limitations necessarily required from Health Visitors.
- (2) Comparative less staff is required.
- (3) The majority of Expectant Mothers, Babies and Toddlers are supervised.
- (4) Fewer Clinic buildings are required. (In Huddersfield only | Clinic building is required for a population of over 100,000.)
- (5) The reduction in Mortality (Maternal and Infantile) is comparatively more marked under the Huddersfield Scheme.
- (6) There is no friction with General Practitioners in carrying out the Scheme.
- (b) In Middleton the scheme best suited to local conditions is a combination of visiting by a Female Medical Officer and Health Visitor, as outlined herewith.

To carry out the provisions of Circular 1550 increased duties will be imposed on the Medical Officer of Health and Health Visitors and increased staff will be necessary.

To increase the number of Health Visitors alone 2 extra Health Visitors would be required, and then the extra work devolving on the Medical Officer of Health would be greater than could possibly be coped with.

I estimate the work of I female Medical Officer is equal to 2 Health Visitors with the skilled medical duties added, as outlined in the schedule.

In calculating the cost of this scheme I consider it the most economical method.

Salaries of 2 Health Visitors (£200 each) £400

Pay of Assistant Female Medical Officer £500 with 50% Ministry of Health grant this is equal to a net increase of £50, but saving will be effected in:—

- (1) Avoiding increase in the number of sessions of the Ante-Natal Clinic at £5 5s. 0d. per session, equal to annual expenditure of £50.
- (2) Immunization Clinic once per week at £2 2s. 0d. per session £100.
- (3) The increased saving of life and health is bound to follow from the scheme and is inestimable (calculated in £ s. d.).

In the meantime your Committee visited Huddersfield to see the procedure adopted there, and at present the Local Doctors and Midwives have been taken into consultation on the Scheme, and your Committee are now waiting the Lancashire County Council's Scheme on the Midwives Bill so that all angles can be considered in toto.

SECTION VIII.

REPORT

on the

MEDICAL INSPECTION OF SCHOOL CHILDREN

For the Year ending December 31st, 1936

THE SCHOOL MEDICAL SERVICE SUMMARY

1. STAFF

School Medical Officer (who is also Medical Officer of Health) Ophthalmic Surgeon (part time) Dental Surgeon (part-time) School Nurses (who act also as Health Visitors) Orthopædic Surgeon and Nurses (part-time) 2. SCHOOL ACCOMMODATION.	1 1 3 3
Number of Schools; Provided	4
Non-provided	0
Accommodation: Provided. Nominal	2 102
Effective	2.150
Non-provided. Nominal	3,188
Effective	2,555
3. AVERAGE NUMBER OF CHILDREN ON T	HE

REGISTER AND AVERAGE ATTENDANCE.

Average number of children on Register... 3,319

2,851

... 85.9%

Average attendance at Schools

Percentage attendance

4. PATEABLE VALUE AND COST OF SCHOOL MEDICAL SERVICE.

Rateable value (1.4.36.) Education Rate (1.4.36) Cost of Medical Inspectio financial year ended 31st	on and t Marc	 l Tre :h, 19	3s. atment	2.3	3d.
Gross	æ 3.	u.	1,415		
Less: Rent—Health Committee	39 18	8 3	1,112	,	,
ment, etc	72	9 8			
			112	7	11
			£1,303	9	4
SCHOOL HYGIENE.					
Hygienic Reports made dur Sanitary Defects reported . General Cleanliness Inspecti			• •••		12 17 24
MEDICAL INSPECTION.					
Routine Inspections made of Special Inspections Re-inspections			year . · ···	1,6	00 70 40
INFECTIOUS DISEASES IN	SCH	OOL	CHILD	REN	٧.
Total in all Schools Total Exclusions on accou	int of	Infe	ctious	3	49
Diseases		• • • •		5	76
Disinfection of School Build	dings		• • •		32
Low attendance Certificate	es gra	inted			27
Closure of School on accoun	it of li	nfecti	on	N	Vil.

5.

6.

7.

8. CLINIC TREATMENT.	9
Attendances at Minor Ailments Clinic	5,878
Nutrition Clinic	345
Eye Clinic	421
Dental Clinic	1,405
Sunlight Clinic	3,865
Remedial Clinic	2,629
Tonsil and Adenoid Operations	19
Ringworm X-Rays	
Referred T.B. Dispensary	10
9. SCHOOL FEEDING.	
Number of children on list	637
Number of Milk Meals provided	97,003
10. BATHS.	
Number of attendances of Children at	
Public Baths	18,884
11. SEASIDE CONVALESCENCE, ETC.	
Number of Children sent to the Seaside under	:
(a) Mayor's Holiday Camp Fund	150
(b) Children's Aid Society—	
Lytham	78
Jubilee Cot, Southport	9
(c) Southport Children's Sanatorium	13
(d) Others—	
Conway Camp (St. Gabriel's	
School)	53
Marple Home (Crippled Chil-	
dren)	3
12. EMPLOYMENT OF SCHOOL CHILDREN.	
Certificates Granted. Part-time	130
13. STATISTICAL TABLES (see pages 199-212).	

THE ORGANIZATION OF THE WORK OF THE HEALTH CENTRE EMBRACES

- A. Public Health Department.
- B. The Clinics.
- C. Supplies.
- D. Care of Building and Equipment.
- A. The Public Health Department deals with all Health Statistics of the District, compiles all reports required by the Ministry of Health, Board of Education, Lancashire County Council and the various Committees of the Town Council; deals with all correspondence devolving on a Public Health Department and a School Medical Department.

Staff—Two Lady Clerks under the direction of the Medical Officer of Health.

- B. The Clinics—include Maternity and Child Welfare and School Clinics—Ante-Natal, Child Welfare, Dental, Eye, Sunlight, Remedial, Minor Ailments, Squint, Nutrition and Special.
 - 18 Sessions are held per week according to Schedule. Staff—Doctors (Special for Ante-Natal, Eye and Remedial, Medical Officer of Health for others, Dental Surgeon for Dental Clinic).

Nurses—3—Duty by rota so that they are on ty when the cases attend from their own Districts and Schools.

Clerks—3—Records are kept for all attendances on the card index system.

Attendances—Approximately 20,000 children per annum, and in addition parents and persons for interview.

Time of attendance is arranged for all children (school and pre-school) so that there is a definite time for attendance at each Clinic. The schools have allotted days. There is a time table for new and repeat cases and special cases (Emergency cases are dealt with at all times as they occur).

Notifications to attend are sent out for the special clinics to parents and schools.

Waiting—There is necessarily a waiting time at Clinics (as at Hospitals) varying according to the number attending, nature of Medical Examination and/or Treatment, and/or Advice, and/or Investigation of case. Undue waiting is guarded against by the organization of time of attendance (which is not always adhered to).

CLINIC TIME-TABLE

MINOR AILMENT CLINIC

Monday and Thursday.—Elm Street, Tonge, St. Peter's, St. Gabriel's.

Tuesday and Friday.—Parkfield, Rhodes, Bowlee, Birch.

Wednesday and Saturday.—Parish, Durnford Street, Thornham, Boarshaw.

New Cases—10-30 a.m. Old Cases— 9 a.m.

Non-attendance—is dealt with by following-up and/or writing parent, and/or Head Teacher, and/or interviewing parent, and/or Reporting to Committee according to circumstances.

Treatments, Advice, etc., are prescribed in all cases by the Medical Officer. All new cases are examined by the Medical Officer. All cases discharged are directed by the Medical Officer.

Abuse of attendance is guarded against.

C. SUPPLIES.

- (1) Are requisitioned by the Medical Officer and approved by the Education and Health Committees.
- (2) Are stored under lock and key in the Dispensary and Store.
- (3) In charge of the Chief Clerk.
- (4) Dispensed by written prescription by the Medical Officer in all cases.

- (5) Where payment is made for supplies receipts given in all cases.
- (6) Requirements are noted daily by the Staff in writing.
- (7) Checking of Supplies is made periodically.
- (8) When payment is made for treatment the payment is placed in a sealed box and collected by the Borough Treasurer.

D. BUILDING AND EQUIPMENT.

- (1) The Cleaner's duties are tabulated.
- (2) Inspection of Building and Equipment is carried out periodically by the Medical Officer.
- (3) An Equipment Register is kept. Each Member of the Staff is responsible to the Medical Officer for efficient care of the Equipment in their several charges.
- (4) Any Defects, etc., discovered are brought to the notice of the Department concerned (Surveyor, Electrical Engineer) and reported to Committee.
- (5) Extinguishers against Fire are installed and examined by the Fire Superintendent.
- (6) Insurance is covered.
- (7) Light and Heating—Economy is exercised. Examined periodically by the Electrical Engineer.
- (8) Care of the grounds—Garden in charge of Parks Superintendent. Cleaning of footway in charge of Surveyor's Department.

CO
CLINICS
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S
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TIMES

	SATURDAY	Minor Ail- ments Clinic	9—12 noon		
ĺ	SAT	Min	9		
	FRIDAY	Minor Ail- ments Clinic Squint Class Remedial Clinic	9—12 noon	Artificial Sun- light Clinic Dental Clinic	2—5 p.m.
	THURSDAY	Minor Ail- ments Clinic Squint Class	9—12 noon	Maternity and Child Welfare Clinic	2—5 p.m.
	TUESDAY WEDNESDAY THURSDAY	Minor Ail- ments Clinic Squint Class Remedial Clinic	9—12 noon	Artificial Sun- Maternity and Maternity and Artificial Sunlight Clinic Child Welfare Clinic Clinic Clinic	2—5 p.m.
	TUESDAY	Minor Ail- ments Clinic Squint Class Eye Clinic	9—12 noon	Artificial Sun- light Clinic Dental Clinic	2—5 p.m.
	MONDAY	Minor Ailments Clinic Squint Class Dental Clinic R e m e d i a l Clinic last Monday in Monday in	9—12 noon	Nutrition Clinic Remedial Clinic Ante - Natal Clinic last Monday in Monday in	2—5 p.m.
		gninroM		Afternoon	

HEALTH CENTRE.—ELECTRIC HEATING.

During the year the Electrical Engineer recommended that the Electric Heating Installation should be overhauled by Messrs. Wardle Engineering Co., the Contractors.

Tests were carried out from October, 1935, to March, 1936, which showed that the space heating per week was 1,185.12 Units, and the average cost per week £2 7s. 6d.

The average working hours on time switch per day is 9.38.

The work was put in hand in November, when the following Report was made:—

- Room 1.—4' gilled heater open-circuited.
- Room 2.—Thermostat faulty.
- Room 3.—Increase in size of the switch controlling the heaters required.
- Room 5.—Increase in size of one switch which controls the heaters required.
- Room 8.—Increase in sizes of 3 switches controlling the heaters required. One thermostat faulty.
- Room 17.—The switch controlling the heaters requires repair.
- Room 20.—The thermostat is faulty and requires repair.

This work has since been carried out.

Pamphlet issued during the year to parents on the objects and uses of the Clinics.

THE MIDDLETON CLINICS. THEIR OBJECTS AND USES.

TO PARENTS.

When a Disease can be prevented you will agree it is better to prevent it rather than allow the Disease to develop and to have treatment to cure it.

Clinics are for the purpose of preventing Disease.

The Borough of Middleton has established a splendid up-to-date **Health Centre** in Durnford Street (opposite the Free Library) efficiently equipped and staffed at which **Advice and Preventive Treatment** are given in the following Clinics.

For the preservation of Health we must start at the beginning through the Maternity and Child Welfare Services. The Clinics in this connection are the Ante-Natal and Child Welfare Clinics.

The Ante-Natal Clinic is for the purpose of advising Expectant Mothers. The advice is given by a specialist. The interview is private, and the information given is confidential. If the mother desires, she can have her own Doctor or Midwife present at the Consultation. If treatment is found to be necessary the mother is advised through her own Doctor or Midwife of the specialist's recommendations. Provision is made for the supply of Grade A or Dried Milks, Cod Liver Oil, Parrish's Chemical Food, Beniax, etc.

Maternity Outfits are loaned. Dental Treatment of a conservative nature is given. If Birth Control advice

is found desirable arrangements are made with the Cp. np-sall Birth Control Clinic for treatment.

All Expectant Mothers should have Ante-Natal Advice.

The Child Welfare Clinic deals with Babies and Young Children up to the age of 5 years.

The object is to direct the mother on management, feeding and general hygiene, to keep her child well.

Each child is first seen by the Health Visitor and Records are prepared and weight noted, and then there is the consultation with the Medical Officer. These consultations are held at routine times—at the 1st, 3rd, 6th, 9th, 12th and 18 months, 2nd, 3rd, 4th and 5th years, and in addition, special consultations are given as advised by the Medical Officer according to the circumstances of health, and also at the request of the mother or nurse.

Mothers sometimes say there is no object in attending the Welfare Centre if the child is doing well. This is a mistaken idea as expert advice is always useful and it is too late to wait until baby takes ill. There are other advantages in attending the Welfare Centre; Dried Milks are issued at cost price or free in necessitous cases, Cod Liver Oil, Parrish's Chemical Food, and other supplies can be obtained. The services of the other Clinics are available to children under 5 years of age. Special attention is given to the Toddlers because it is found when young children enter school a number of these children have defects in health which could have been prevented by supervision at the Welfare Centre.

All Mothers should attend the Welfare Centre until their children are 5 years of age.

The School Clinics although directly intended for School Children are also available, as stated, for preschool children.

The purposes of these Clinics are to keep the children healthy and well by Medical Examination, Supervision, and Preventive treatment.

The Clinics include:-

(a) The Nutrition Clinic which deals with sub-normal children. The conditions bringing about the state of under-nutrition are investigated.

Parents are advised on Feeding, Management and Hygiene. Many of these children require Defects to be attended to. Sunlight and other treatment may be recommended. The circumstances in each individual case are dealt with. Recommendation for School Milk or Free Dinners are made in appropriate cases.

- (b) Sunlight Clinic.—The treatment is given by Ultra-Violet, Infra-Red and Radiant Heat rays under the direction of the Medical Officer. Pale, debilitated and underweight children do well under treatment as well as special conditions such as Rheumatism, Skin Diseases, etc. It is usual to have reports from parents that the children eat and sleep better and are more lively and greatly improved in health, after a course of treatment.
- (c) Minor Ailments Clinic deals with Injuries and other Minor Defects, and it is most important that parents should see to it that treatment for such conditions is sought for at once. Early and immediate treatment saves complications, prolonged treatment, and waste of school time.
- (d) Dental Clinic.—It should be clearly understood that the purpose of the Dental Clinic is to prevent Dental Decay and to give conservative treatment.

It is too late to wait until teeth have to be extracted. The dentist inspects the children regularly, and on his advice attendance at the Dental Clinic is recommended.

Parents should make a point to take advantage of this service as it will save expense and injury to health later in life.

- (e) Eye Clinic.—Defective Vision in children is discovered at the Medical Inspections in the Schools, and the cases are referred to the Eye Specialist by the Medical Officer. Certain Vision Defects in School Children are serious, such as progressive Myopia (short-sight), and parents are earnestly advised to give particular attention to the advice given at this Clinic.
- (f) Remedial Clinic deals with Crippling conditions such as Rickets, and the treatment is directed to the prevention of all deformities discovered by the Medical Officer in Pre-School and School Children at the Clinics and in the Schools. The treatment is given by specially trained Orthopaedic Nurses under the direction of the Orthopaedic Surgeon. In many of these cases treatment is necessarily of a prolonged period, and it is most important that parents see that their children attend regularly, as directed.
- (g) Ear, Nose and Throat Defects.—Advice is given in these cases by the Medical Officer. When Tonsil and Adenoid Operation is recommended arrangements are made with the Children's Hospitals through your own Doctor.
- (h) Ringworm.—Diagnosis is made by means of the Ultra-Violet Rays by the Medical Officer, and the case referred to the Manchester Skin Hospital for X-Ray treatment.

- (i) Tuberculosis.—Definite or suspected tuberculosis in a child, and contacts of a Tuberculosis case are referred by the Medical Officer to the Tuberculosis Officer at the T.B. Dispensary, Manchester Old Road. Parents are advised that Tuberculosis is an infectious disease and liable to be contracted from a person suffering from Consumption.
- (j) Protection against Diphtheria.—Diphtheria is a most fatal Disease in young children, and parents are strongly advised to have their children, before entering school, made immune to Diphtheria by inoculation.

This is a safe procedure and will be carried out by your own Doctor on the recommendation of the Medical Officer of Health.

(k) Exceptional Children.—Include children who are Deaf or Blind (totally or partially), Mentally Defective or Physically Defective (from Tuberculosis, Crippling, Heart Disease and Rheumatism, or otherwise Delicate).

Advice is given by the Medical Officer in these cases.

(1) Health and Education.—Every opportunity is taken to give Health advice both collectively and individually, to parents and children at the Health Centre. Children and parents are advised to join the Personal Health Association for this purpose.

Parents are requested to make use of the Clinics to the best advantage for the Preservation of Health and the Prevention of Ill-health.

CO-ORDINATION OF THE CHILD WELFARE AND SCHOOL SERVICES.

During the year the supervision of the pre-school child has been brought to notice prominently by the issue of Circular 1550 (Ministry of Health, 29—5—36).

The necessity for greater attention in this respect has been evident.

This circular has had the attention of your Committee, and as instructed in Minute 2551 of the Council, a comprehensive Report dealing with Maternity and Child Welfare as a whole was prepared by me, and is at present under consideration.

Details of this Report will be found in the Maternity and Child Welfare Section of my Annual Report.

During the year 351 Births were notified, and 31.34% of Expectant Mothers to notified Births attended the Welfare Centres.

At the two Welfare Centres, 102 sessions were held. The total attendances of children during the year amounted to 6,181; of these 3,605 were children 1—5 years.

The Medical Inspections of Toddlers numbered 590, and these examinations showed that 27.36% had no Defects, and in 72.64% were found Defects.

These inspections are specially desirable, and take place as a routine in the Child Welfare Clinics at the age of 3, 6, 9, 12 and 18 months, and at 2nd, 3rd, 4th and 5th years. In addition, special consultations are held in all cases demanding frequent review, and at the request of the mother or the Health Visitor.

Home supervision is also carried out, and during the year 4,940 Visits were made to the Homes by the Health Visitors.

These Visits included 199 Visits to Expectant Mothers, 1,625 Visits to children under 1 year, and 3,116 Visits to children 1—5 years.

In Pre-School Children, 149 cases of Infectious Diseases were notified, and in Non-Notifiable Infectious Diseases, 145 cases of Measles and 155 cases of Whooping Cough were discovered and followed up. An arrangement exists for Home Nursing with the Nursing Association of these cases.

The Pre-School Child is given the facility of Treatment at the School Clinics.

The attendances of Pre-School Children at these Clinics during the year were:—

764 at the Sunlight Clinic.

22 ,, Dental Clinic.

28 ,, Eye Clinic.

193 ,, Minor Ailments Clinic.

346 ,, Remedial Clinic.

For Nutritional purposes Milk, Cod Liver Oil, Virol and Parrish's Chemical Food are provided on payment, and also free in necessitous cases.

During the year 3 children were registered under the Children's Act. The total on the Register is 7, of whom 5 are of school age.

Special emphasis is given to the education of the Mothers in Management, Nurture and Nutrition of the children at the Centres.

NURSERY TRAINING.

Apropos to my remarks of last year Circular 1444 (Board of Education, dated 6—1—36), deals with Nursery Schools and Training of Pre-School Children. Provision in this Area for those children under 5 years of age who

would benefit by such training is being met by the fermation of Nursery Classes in the Elementary Schools under the Reorganization Scheme.

This type of class is well exemplified in the New Boarshaw School.

The number of children under 5 on the School Register during the year was 133.

BOARSHAW PRIMARY SCHOOL.

This new school was opened during the year and has accommodation for 350 children, ages up to 11 years.

I am indebted to Mr. B. Widdows, L.R.l.B.A., Architect of the School, for the following description:—

"The plan of the building is simple and straightforward, being built in the form of the letter "E."

The South wing contains three ordinary classrooms and a special room for Babies, with Babies cloaks and lavatory en suite. The North wing is planned on almost identical lines with three classrooms and a Practical Room. The Centre wing consists of the Assembly Hall with platform. The only other teaching accommodation consists of a Special Room in the centre of the front elevation.

The three hygienic principles applicable to a building—heating, lighting and ventilation—are dealt with in a manner different from that in most buildings. This system has now been in use in certain schools for upwards of 20 years and is extremely popular where it is used correctly by the staff. In an ordinary building the lighting and ventilation are obtained through the same medium, namely, the windows. In the classrooms in this building they are separated. The light is obtained by means of continuous north lights which give ample, well diffused light coming from above and to the left of the children.

The ventilation in these rooms is provided by glazed partitions on either side. These are so arranged that the top section can fall in a few inches to form a hopper, alternatively the top section can be let right down and a further alternative is provided whereby the whole can be opened. It will therefore be seen that provision can be made for maximum ventilation under all conditions of wind pressure. The side away from the wind should, except in exceptional weather, be fully opened, and the other side should always at least have the hoppers open. It is perhaps not out of place to emphasise that it is impossible to use this ventilation system satisfactorily and at the same time endeavour to keep the air in the rooms at any given temperature. It is a great mistake to use thermometers in these rooms.

Obviously in such open-air conditions it is futile to warm the air in the rooms, and a different method has therefore been employed to keep the children comfortable. The whole of the floor is warmed to a temperature which will give such heat as is necessary without causing discomfort to the feet. It is a fact that provided the blood is circulating satisfactorily an individual is comfortable even when the skin temperature (on the face) is low. Again it is proved that when the feet and hands are warm the blood is circulating well. There is direct warm contact with the feet, and as the whole floor is acting as a large low temperature radiator bodily comfort is ensured. good circulation is also assisted to a great extent by breathing the cool unvitiated air. It will be found that only in cases of under-nourishment will any extra clothing be required even when full ventilation on a cold winter's day is used

Experiments have conclusively shown the greater mental alertness at the end of school hours of children working under these conditions compared with those working in the more common "closed" classrooms. Extra-

ordinary statistics have been obtained of improved attendance figures.

Great care has been taken with the internal decorations to give a cheerful yet varied effect.

The floors of Granwood blocks when polished provide a clean and hygienic surface. Dadoes generally are of sheet rubber for the same reason.

Heat is provided under the hat and coat rails which effectively airs all clothing, and except in unusual circumstances ensures the children leaving with dry clothing on wet days.

BOARSHAW CLINIC.

It was considered advisable to hold a Minor Ailments Clinic once per week at this School. This has been approved by your Committee on my recommendation.

The following tables show the attendances and treatments given:—

					No. of
No. of	Attend-			Injuries,	Treat-
Sessions.	ances.	Skin.	Eye.	etc.	ments.
14	411	30	4	98	411

SCHOOL HYGIENE.

Constant supervision has been exercised over the Hygienic and Sanitary conditions of the School Buildings and environment, and observations were made on the following conditions during the year:—

Dirty Floors.

Excessive Dust on ledges.

Insufficient Ventilation.

Emptying of Ashpit whilst Infant Children are in Classrooms and Playground.

Defective Eaves Gutter, and lack of rainwater pipe to Girls' Closets.

Lack of Grating to rainwater gully—boys' urinal Defective Rainwater Pipe and Eaves Gutters at Gable.

Defective Rainwater Pipe to Rear Porch.

Fixed Cover to Inspection Chamber, Girls' Yard.

Defective Rubber Cones to Fresh Water Closets.

Defective Eaves Spouting and Rainwater Pipe.

Defective Rainwater Pipe to Boys' Cloakroom, Boys' Yard.

Defective Joint between Flush Pipe and Pedestals, Girls' Closets.

Defective Joint between Flush Pipe and Pedestals, Boys' Closets.

Defective Wood Eaves Gutter, Girls' Yard. Lack of Doors to Closets.

SCHOOL FLOORS.

Various considerations have been given to the cleansing of School Floors, and the present system of hand scrubbing limited to holiday periods, plus dry scrubbing with powder (Dusmo, Farinol, etc.), is, I consider, an improvement on dry scrubbing alone.

The Bacteriological Examination of the washings of I square yard of School Floor with dry scrubbing alone gave the following results:—

- (a) 4,700,000 organisms capable of growing at body temperature on lemco agar.
- (b) 2,800,000 organisms capable of growing at 20°C. on lemco agar.
- (c) No B. coli was isolated.
- (d) S. faecalis was present, approximately 100 organisms of this type in the whole washing.

(e) B. welchii was present, approximately \$00 spores in the whole washing. (S. faecalis and B. welchii are faecal organisms of greater resistance than B. coli.).

Mechanical scrubbing such as the electrical system gives the cleanest floors.

Previous reports on Floor Cleaning are contained in Annual Reports of:—

1925—Page 136 1926— ,, 109 1932— ,, 116

STRUCTURE IMPROVEMENTS IN THE SCHOOLS.

Elm Street School:

Extensions—

- (1) New Craft Room.
- (2) , Domestic Science Room.
- (3) ,, Science Room.
- (4) " Handicraft Room.
- (5) ,, Male Staff Room.

Reorganisation—

- (1) New Infants' Classroom.
- (2) " Infants' Staff Room.
- (3) ,, Infants' Assembly Hall.
- (4) Enlargement of Female Staff Room and Lavatory Accommodation.
- (5) Enlargement of Girls' Cloakroom, and Lavatory Accommodation.
- (6) Enlargement of Headmaster's Room and Lavatory Accommodation.
- (7) Enlargement of Art Room.
- (8) New Store.
- (9) Boys' Cloakroom and Lavatories.

Durnford Street School:-

Re-building Boundary Walls where dangerous.

Parkfield School:-

Re-surfacing Infants' Playground, and constructing new Sand Pit.

Thornham School:-

Re-surfacing Boys' Playground.

Tonge School:—

New Conveniences for Girls and Boys.

The following Schools have been decorated during the year:—

Durnford Street, Parkfield (internal), Rhodes Council, Thornham (external).

IMPROVEMENTS IN EQUIPMENT.

More modern desks are in use in the schools, and in several Infant Departments School Rest Cots with blankets have been provided.

VITA-GLASS IN WINDOWS.

Replacement of broken windows by Vita-glass—10 panes added during the year.

Number of panes of Vita-glass in school windows—210.

DESKS.

Although a number of replacements of modern desks have taken place in the various schools, more attention to posture is required.

DRINKING FACILITIES.

Number of Bubble Fountains in schools-19.

POSTURE OF SCHOOL CHILDREN.

andi

I make a special note to draw attention to a condition which I feel requires constant supervision.

"A large, though varying proportion, of school children show signs of mal-posture," states the Handbook on Health Education, issued by the Board of Education, and this area shows no exception to the rule.

How far this condition of posture is related to Habit it is not possible to state, but there is no question of its frequent relationship to fatigue, sub-nutrition and physical defects.

Good posture is a necessity for good health in the growing child.

The chapter on "Good Posture" in the Syllabus of Physical Training requires to be imbued into the children's minds by repeated talks and demonstrations.

An extract from this chapter hung up in each school would remind the children of its importance. Notes from it could be made by the children and essays on it written by them in addition to the above.

PERSONAL CLEANLINESS OF CHILDREN.

Personal Cleanliness of Children received constant attention both in Medical Inspection and in the General Cleanliness Inspections by the School Nurses.

The following tables give the number of Inspections carried out and the conditions found:—

1931. 1932. 1933. 1934. 1935. 1936. were: 10,048 9,644 9,660 7,920 9,060 10,924

Percentage of Verminous conditions found:-

	1931.	1932.	1933.	1934.	1935.	1936.
Head Nits	 6.3	5.5	4.4	6.61	4.32	4.18
Body F.B.	 .6	.9	.3	.4	.5	.09

General Cleanliness Inspections.

Conditions Found:

Number of Children			Cloth-	Foot-
examined.	Nits.	Skin.	ing.	gear.
10,924	555	10	24	17

l would appeal to Teachers to back these efforts up by the **Daily Inspection** advocated in the Hygiene Scheme.

The Cleanliness and appearance of the children would be greatly improved by the supply in the schools of washbasins with warm water, an ample supply of soap and clean towels.

One of these basins should be a foot basin.

Health and Cleanliness Posters are exhibited in the Schools, but a "drive" is required to put these lessons more into practice.

The children need better facilities in the provision of wash-basins with hot water, and spray baths.

MINOR INJURIES AND FIRST-AID.

Accommodation is provided in the Schools for the First-Aid treatment of Minor Injuries.

FIRST-AID SUPPLIES.

The contents of the First-Aid Boxes which are installed in all Schools are given at page 8-9 of the Annual Report, 1934. These boxes are replenished from the School Clinic on requisition on the approved form by the Head Teachers.

MINOR INJURIES.

There is still delay in obtaining immediate treatment in these conditions although improvement in this respect is noted. A notice "Injuries and Sores, however slight, should always receive immediate attention," should be posted in every school, and the children's attention constantly drawn to it.

The following Report was made during the year:—

"Children often turn up at the Clinic with an abrasion, cut or bruise, septic sore, other skin disease, etc., which have occurred several days or longer beforehand.

The consequence is **prolonged** attendance at the Minor Ailments Clinic which, if the condition had been dealt with immediately after occurrence, much less time would have been required for treatment, and a great saving in **school time gained**.

I suggest that a Notice be put in each School advising children to report to the teacher at once when an injury occurs or when there is any skin trouble or other minor ailment so that Clinic treatment can be immediate."

HEALTH EDUCATION.

A vast amount of pamphleteering work is done through the Clinics in this Area. Health pamphlets on the various matters affecting Health are distributed to the Schools, and these pamphlets reach the parents through the children.

During the Jubilee Health Week this year 5,000 copies of the Souvenir Health Pamphlet were distributed, also the pamphlet describing the Objects of the Clinics.

When there is prevalence of any particular Infection the opportunity is taken of distributing leaflets in the Schools dealing with prevention.

Health and Cleanliness and other Health Posters are exhibited in the Schools.

In the Health Centre there is an Illuminated Health Poster display and Health Exhibits are continuously shown during the year.

The School Children, I find, have a good knowledge of Health Rules as exemplified in the Schools Health Song, but the weak link is the practical application.

l consider the greatest advance made during the year has been the formation of the Junior Branch of the Personal Health Association.

The children's interest has been roused by this venture. The movement is in keeping with the Objects of the Association. The conditions of Membership imply the consent of the parents and teachers, the issue of a Membership Card with the Objects of the Association stated thereon, and an artistic badge to be worn.

900 children have been enrolled, and their first Meeting was so well attended that a second performance had to be held to accommodate the numbers. It took the form of a "Health Revue," given by the children themselves, with the following items on the programme:—

Act entitled, "Sunshine." Mayor's Address, and reply to the Mayor by a boy.

Health Pictures.

Band Music by a Boy.

Rhythmic Dance Movements by a Girls' Class.

Recitation "Be Fit" (Kipling), by a boy.

The special effort made each year in the Schools Health Week is intended to impress the child with the importance of Health.

- 1. Schools Health Week was held in October 4th— 11th, and embraced:—
 - Talks during the week by the Teachers on the "Hygiene of Fcod and Drink."
 - 2. Exhibits in School of work done by the children.
 - 3. Health Talks in the Schools by Mr. T. Bowen Partington.
 - 4. Cinema afternoon for School Children in the Empire Theatre.

Empire Theatre—Friday, 2 o'clock:—

- 1. Address by the Chairman, Education Committee.
- 2. Health Song.
- 3. Address by Mr. T. Bowen Partington.
- 4. Health Films:—
 - 1. "A Day in the Fresh Air."
 - 2. "Giro and his Enemies."
 - 3. "Silver Lining."
 - 4. "Death Mystery."
 - 5. "The Trapeze Man Talks."

Health Centre-During the Week:-

Competitions.

Exhibits-12-00 to 5-00 p.m.

SCHEME OF TRAINING FOR MOTHERCRAFT CLASS.

A.

- 1. Register attendance.
- 2. Wash hands.
- 3. Prepare Centre under direction of Nurse.
- 4. To come supplied with notebook and pencil.
- 5. Instruction on Pamphlets, as below.
- 6. Duties to be directed and supervised by Health Visitors on duty.
- 7. Write a short account, "What I learnt at Welfare Centre," and hand it to Nurse the following week.
- 8. To join the Junior Red Cross Link.
- 9. Course to consist of 6 sessions.
- 10. The Course to be based on the following 6 pamphlets—one to be given at each session.
 - Section 1. How to Rear Baby.
 - 2. Fresh Air and Ventilation.
 - 3. Colds.
 - 4. War on Flies.
 - 5. Teeth.
 - 6. Management, 1—5 years.

B. Practical Demonstrations.

- 1. Cleansing finger-nails and sterilizing hands.
- 2. Sterilizing bottle and teat.
- 3. Prepare artificial feed.
- 4. Cleansing milk jug, cooling and cover.
- 5. Dressing and undressing baby.
- 6. Preparation of bath.
- 7. Preparation of cot and pram.
- 8. Ventilation of room.
- 9. Practical Hints in the Home, from Health and Cleanliness Book.
- 10. How to buy, select and store foods.

MEDICAL INSPECTION OF SCHOOL CHILDREN. ACCOMMODATION FOR MEDICAL INSPECTION IN THE SCHOOLS.

Accommodation in the Schools for purpose is 154

:	satisfa table:-	cto	ry	in	s S	ev	era	.I d	of	th	e	Sc	ho	ols	, a	ıs	she	ewi	n i	in	th.	is		1
Dressing Accommodation	Corridor Hall	Hall	Same (behind	curtain)	į	Same Room	Cloak Room			Same Room	Seen at Clinic		Same Room				Same Room		Same Room		Same Room	Same Room	Same Room	Same Room
Waiting Room	Corridor Hall	Hall	Adjoining Room		I	Same Room	Cloak Room			Same Room	Seen at Clinic	Seen at Parochial	Hall	Seen at adjoining	cottage house —	Kitchen or in	Men's Institute		Corridor	Adjoining Class	Room	Infant Room	Same Room	Same Room
Medical Inspection	Class Room (Mixed) (Infants)	Class Room	Basement Room—light,	heat and ventilation de-	fective	Institute	Head Master's Room—	unsuitable (light, ventila-	tion and space)	Class Room	None	None			None			Small Class Room-un-	suitable size & ventilation	Class Room—ventilation		Cloak Room	Infant Class Room	Infant Class Room
School	Durnford St. Council	Elm St. Council	Rhodes Council			Rhodes Infant	Parkfield Senior			Parkfield Infant	Parish Mixed & Infant	Tonge Mixed & Infant	1	St. Peter's Mixed &	Infant			St. Gabriel's Mixed		St. Gabriel's Infants		Birch	Bowlee	Thornham

With the improvements carried out at Parkfield School, the building of the new School for St. Peter's, and the enlargement of Elm Street School, satisfactory accommodation will be available in future in these Schools.

Routine Medical Inspections of the three age-groups are carried out:—

- (1) in compliance with Article 17 of the Consolidated Regulations relating to Special Services— Grant Regulations No. 19;
- (2) on the school premises (or at a place specially sanctioned by the Board);
- (3) for the purpose of making a report on each child on the lines of the approved Schedule set out in Circular 582.

The number of children due for and inspected during the year was:—

Routine. Special. Re-Inspections.

Entrants ... 379
Intermediate ... 380
Leavers ... 324
Other Ages ... 17

In addition to the "Routine" "Special" inspections are made.

A "Special" Inspection is a medical inspection by the School Medical Officer himself of a child specially selected or referred for such inspection, i.e., not inspection at a routine medical inspection as defined above. Such children may be selected by the Medical Officer during a visit to the School or may be referred to him by the Teachers, School Nurses, Attendance Officer, Parents or otherwise.

All Medical Inspections are inspections by the Medical Officer himself.

Statistics for Previous Years—Routine Inspections.

1929. 1930. 1931. 1932. 1933. 1934. 1935.

Routine . 1,518 1,172 1,216 1,342 1,308 1,150 1,134

Specials . 895 1,273 1,412 1,556 1,293 1,368 1,578

Nature of Medical Inspection.

The inspection of each child entails the detailed examination under each particular given in the Schedule below.

The figures shown opposite each item give the total number of Defects found in Routine and Special Inspections Combined (2,770 Total).

1.	Clothing	• • • • • •	• • •	5
2.	Footgear	• • • • • •	• • •	4
3.	Cleanliness—Head	• • • • • •	• • •	65
4.	" Body	• • • • • •	• • •	2
5.	Nutrition	• • • • • •		17
6.	Skin-Ringworm, Head	• • • • • •	• • •	_
7.	" " Body	• • • • • •	• • •	2
8.	,, Scabies	• • • • • •	• • •	5
9.	" Impetigo	• • • • • •	• • •	55
10.	,, Other Diseases			161
11.	Eye—Blepharitis	• • • • • •		21
12.	,, Conjunctivitis		• • •	35
13.	,. Other Conditions	• • • • • •		28

4.	,, Vision R	• • •)
15.	,, ,, L	• • •	231
16.	,, Squint	• • •	73
17.	Ear—Hearing	• • •	39
18.	,, Otitis media	• • •	54
19.	,, Other Diseases	• • •	10
20.	Nose and Throat—Tonsils		445
21.	,, Adenoids	• • •	5
22.	,, Other Conditions	• • •	181
23.	,, Tonsils and Adend	oids	9
24.	Cervical Glands	• • •	289
25.	Speech	• • •	20
26.	Teeth—Number decayed	• • •	885
27.	.,, Conditions (other)	• • •	72
28.	Heart and Circulation	• • •	42
29.	Anæmia	• • •	67
30.	Lungs	• • •	71
31.	Tuberculosis—Pulmonary	• • •	1
32.	,, Non-Pulmonary		10
33.	Nervous System—Epilepsy	• • •	6
34.	,, Chorea		4
35.	,, Other Conditions	• • •	87
36.	Deformities—Rickets		21
37.	,, Spinal Curvature	• • •	9
38.	,, Other Forms		293
39.	Other Defects and Diseases		413
40.	Mental Conditions		31

FINDINGS OF MEDICAL INSPECTION

Ear

Reference: Table 2 (p. 200).

DEFECTS.	DEFECTS.								
				examine	-				
•			1934.	1935.	1936.				
Malnutrition	• • •		0.69	0.79	0.2				
Uncleanliness	• • •		8.70	6.35	5.18				
Skin Diseases			2.17	5.20	2.91				
Eye Diseases			3.30	2.91	2.64				
Defective Vision and	Squii	nt .	16.96	14.55	12.28				
Ear		• • •	2.61	2.47	3.64				
Nose and Throat			44.44	43.30	39.28				
Dental Diseases		• • •	66.53	63.75	61.91				
Deformities			14.78	14.46	13.54				
Heart Disease			1.91	2.02	2.00				
Tuberculosis			0.26	0.35	0.27				
Nervous Diseases		• • •	6.52	5.02	5.18				
	., ,	,							
The percentage of ch	ıldrei	n sho	wing		0/				
No Defects were					%. 10.54				
One Defect		• • •	• • • • • • •	• • •	27.27				
Two Defects			• • • • • • •	• • •	30.82				
	• • •	• • •	• • • • • •	• • •	21.64				
Three Defects More than three	• • •	• • •	• • • • • • • • • • • • • • • • • • • •		9.73				
	• • •	• • •	• • • • • • • • • • • • • • • • • • • •	· · · ·	1.30				
Number of defects per	r rou	ine c	ase exan	ninea	1.50				
Percentage of cases	requi	ring (treatmen	t					
Entrants				• • ¢	17.68				
Intermediates					19.47				
Leavers		• • •			23.76				
Others	• • •		•••		11.76				

PINSIQUE OF THE CHILDREN.

Averages.

The averages of the Height and Weight correlation in Middleton children compared with the British (Dunstan table) and American (Emerson) standards, and the number of children shewing a 7% (and more) Underweight for Height in each.

	ricigiit in cacii.		
	Middleton Cases 7%	British (Dunstan)	American (Emerson)
H	eight Weight Un'weight	Height Weight Un'weight	
× 3 4 4 4 4 4 4 4 4 4 4 5 5 5 5 5 5 5 5 5	Cases 7% [eight Weight Un'weight] under 33.2 2 9 34.47 4 0 36.75 2 1 38.54 3 2 39.65 4 3 41.43 3 4 42.71 4 5 44.74 3 6 47.08 4 7 48.83 7 8 53. 10 9 55.44 9 0 57.31 12 1 59.58 10 2 64.22 3 66.87 6 7 79.36 5 71. 6 76.78 6 7 79.36 5 8 82.56 8 9 83.58 5 89. 11	Cases 7%	Cases 7%
16	64 105.5 	64 98 — 65 101 —	64 121.5 ,1 65 126 —
	97. — 66 — —		
	7 — —		
	-		
	9 — —	<u> </u>	
17			

FOLLOWING-UP

Following-up is an important feature in School Medical work, and is carried out by three School Nurses.

- 1. The Nurses made 890 visits to the Schools for the purpose of
- (a) Carrying out a general cleanliness inspection of the children (10,924 inspections).
- (b) Checking School Defect records to see if children who have been referred for medical treatment at Medical Inspection have had attention (1,168 cases).
- (c) Conferring with the teachers with regard to sick absentees (597 children).
- (d) Enquiring into non-attendance of children notified to attend the Clinics (489 children).
- (e) Finding contacts of Infectious Diseases and suspected cases of infection (45 cases).
- 2. Visiting the homes:—
- (a) Children Nursed Out under the Children Act (52 visits).
- (b) To investigate causes of absence from sickness (816 cases).
- (c) To investigate Infectious Cases and Contacts who are excluded under Para. (1), Art. 53 (b) (346 cases).
- (d) To find the cause of prolonged absenteeism (16 cases).

NETRITION

The state of nutrition of the children is assessed on a clinical basis, i.e., by reviewing the physical and mental condition of the child by medical examination. The object is to determine how far the child falls short of the state of normality by showing symptoms, however slight, of undernourishment. The factors taken into account in arriving at this decision are general appearance and physique, the condition of the mucous membranes and muscular symptom, the presence or loss of subcutaneous fat, whether the child is cheerful or dull, alert or tired, of fresh or muddy complexion, good or bad posture, and other physical defects.

In addition, the state of appetite is of importance as shewing how the child is assimilating its food, the condition of the bowels such as constipation, the food habits of the child, e.g., eating at irregular times, not chewing its food, dislike of essential articles of diet, e.g., Milk.

Over-fatigue in children is a factor which does not receive sufficient attention. It is usually due to a combination of causes—too much activity, physical and mental, too little sleep, irregularity, want of fresh air, stress, worry, wrong habits and so forth.

These added to a poor diet or even a full diet will result in failure to gain weight or even loss of weight, irritability, restless sleep and sub-nutrition.

The degree of under nutrition varies from very slight upwards, but there are only .2% which can be considered definitely badly-nourished of the children inspected in Routine Groups.

I am definitely of opinion that the economic food factor per se is only partially responsible for this subnutritional state and with the better selection of foods, more attention to cooking in the homes, increased hygienic core, more open-air education and physical training this state would be much less.

The Height and Weight standard of the area shows that 12% of the children are 7 lbs. under this standard.

In estimating the Nutritional state of the child the Clinical defects have been considered along with the l-leight and Weight standard and with Dieting and Assimilation of food and the general Hygiene of the child. My view as to the causes of the extent of sub-nutrition in this area is summed up in the quotation given in last year's report, as follows:—

"Under-Nourishment may be due in part to an insufficient quantity of food but it is evident on all sides that it is more usually due to improper feeding, to fatigue, to faulty habits of hygiene, and to ill-health or disease. But the principal cause is a body unable properly to assimilate the food supplied to it."

The recommendations which I made in last year's Report I repeat because of their importance:—

- (1) The increased supply of milk in Schools.
- (2) Propaganda (see pamphlet, "Your Child at School" (Annual Report, 1933) and "Health Week Book on Nutrition.")
- (3) Treatment of Defects through the Clinics.
- (4) Seaside Convalescence through the Mayor's Holiday (School) Fund, etc.
- (5) Extension of Cookery Centres in the Schools and the inclusion of Boys in these Classes.

- (6) Preparation of Mid-day Meals by the Cookery Centres for suitable children, and further supply of school milk.
 - (7) Extension of Hygienic teaching on Food Values and Food Habits in the Schools.
 - (8) Extension of Physical Training under the supervision of Physical Instructors.
 - (9) The establishment of Nursery Classes.

CONTROL OF INFECTIOUS DISEASES IN THE SCHOOLS DURING THE YEAR

STATE OF VACCINATION

Entrants. Intermediates. Leavers. Others.											
Year		р	er cent.	per cent.	per cent.	per cent.					
1925	• • •	• • •	31.87	37.55	54.09	44.23					
1926	• • •	•••	26.41	40.69	47.89	43.53					
1927	• • •	•••	27.61	40.20	43.43	47.77					
1928	• • •	• • •	39.72	30.75	43.34	54.38					
1929	• • •	• • •	28.95	30.16	36.55	40.01					
1930	• • •	• • •	25.65	27.93	32.28	30.77					
1931		• • •	29.54	24.04	33.97	55.00					
1932	• • •	• • •	28.64	31.72	26.32	33.33					
1933	•••	• • •	24.06	30.28	29.31	37.5					
1934	• • •	• • •	19.33	38.30	28.05	17.65					
1935	• • •	• • •	12.82	28.70	28.99	35.01					
1936		• • •	12.67	27.37	35.5	11.76					

INFECTIOUS DISEASES HISTORY

3.4

E	ntrants. l	ntermediate	s. Leavers.	Others.
	per cent.	per cent.	per cent.	per cent.
Measles	54.9	84.75	88.90	94.12
Whooping Cough	57.01	56.06	59.89	47.06
Chickenpox	37.21	55.82	61.42	5.88
Scarlet Fever	4.75	14.47	12.35	11.76
Diphtheria	1.85	3.95	5.25	
Pneumonia	9.50	10.	16.05	23.53
Other Diseases	10.82	16.32	24.69	23.53

INCIDENCE OF INFECTIOUS DISEASES IN THE SCHOOLS DURING THE YEAR

	Chpx.	S.F.	Diph	Pn.	Measles.	T.B. Pulm.	T.B. Non-Pulm.	Total.
Parish C. of E	11	4	4	1			—	20
Durnford Street	7 2	2	5			_	1	80
Thornham	19	—	- 1		—	_	_	20
Boarshaw Primary	2	1			—	—		3
Parkfield	69	2	3	2	_	_		76
Rhodes	30	3	—		—		—	33
Birch			1	—		_		1
Bowlee		1						1
Tonge	60	3	1		1	-	1	66
St. Peter's	19		- 1	—		1		21
Elm Street	6	8	2	_	—			16
St. Gabriel's		2		?	80-180-1104		derector de	4
Other	2	2	2		2		_	8
	290	28	20	5	3	1	2	349

SFASONAL INCIDENCE

STATION ALL IN		Chpx.	S.F.	Diph.	Pn.	Measles.	T.B. Pulm.	T.B. Non-Pulm.	Total.
January	• • •	35	6	1	_	_	_	_	42
February	•••	57	2	_	_	_	_	_	59
March	•••	68	_	3	_	_	_	_	71
April	• • •	23	4	3	_	1	_	_	31 •
May	•••	3	2	1	1	1	_	_	8
June	•••	2	1	1	1				5
July	•••	35	_	1	_	1	_	—	37
August	•••	39	3	4	_		1	_	47
September	•••	8	3	3	—			1	15
October	•••	_	1	_	—	_	_	1	2
November	•••	4	2	1		_	_	_	7
December	•••	16	4	2	3	_	_	_	25
		290	28	20	5	3	1	2	349

AGE INCIDENCE

Years	4	5	6	7	8	9	10	11	12	13	14	Total
Boys	17	48	46	28	21	8	5	5	4	2	_	184
Girls	14	44	28	34	17	11	5	5	5	2	_	165
Total	31	92	74	62	38	19	10	10	9	4	_	349

EXCLUSIONS.	(Under	Art.	53	(b).	Code	1909).
1.					2.	3.

	Infection		Other		
Infectiou	us not		(ringworn	n.	Debility,
Notifiabl	le. notifiab	le. Contact	s. etc.)	Verminous	s. &c.
322	146	108	45	1	96
Period i	n days.				
	2,620	885	162	3	414
			No. of	No	o. of
		child	ren exclud	led. days	excluded.
Under 1	Paragraph	1	621	8	.125
,	,,	2	1		3
,	, ,	3	96		414

Infectious Diseases Investigated in the homes.

	First Visit	Subsequent Visit
Scarlet Fever	. 28	31
Chickenpox	. 288	145
Diphtheria	. 20	28
Pneumonia	. 5	_
Measles	. 89	
Whooping Cough	. 70	_
Contacts	. 5	
Suspicious Throats	. 9	
Other Visits	. 25	

DISINFECTION OF SCHOOLS

The number of schools disinfected during the year by the Sanitary Department was 32.

CLOSURE OF SCHOOLS

No schools were closed during the year on account of epidemic disease.

LOW ATTENDANCE CERTIFICATES ISSUED

						Per Cent.
Sch	nool.		$W\epsilon$	eek endii	ng	Attendance.
Tonge In	nfant	• • •	17th	January,	1936	58.9
,,	**	•••	24th	,,	,,	54.6
"	,,	• • •	31st	,,	,,	49.7
Elm Stree	t Infant	• • •	10th	•,	,,	44.5
,,,	,,	• • •	17th	,,	,,	46.5
12	**	• • •	24th	• •	,,	39.6
,,	,,	• • •	31st	• •	,,	44.1
Parkfield	Infant	• • •	10th	٠,	.9 9	53.3
,,	,,	• • •	17th	,,	,,	52.8
,,	,,		24th	,,	,,	41.2
,,	,,	• • •	31st	,,	,,	40.4
All Saint	s, Rhod	es .	24th	,,	,,	54.3
Tonge In	nfant		7th	Februar	у, "	54.6
,,	,,	• • •	14th	,,	,,	58.2
Parkfield	Infant	• • •	7th	, ,	,,	41.6
**	**	• • •	14th	• •	,,	44.2
,,	**	•••	21st	,,	, ,	41.4
,,	,,	•••	28th	,,	,,	50.
Elm Stree	et Infant		7th	,,	,,	53.
,,	,,	• • •	14th	,,	,,	55.7
D. S. Inf	ant	• • •	14th	February	7, ,,	55. 7
,,	,,		21st	,,	,,	59.4
,,	,,		28th	,,	,,	59.6
Parkfield	Infant		6th	March,	,,	51.8
Tonge In	nfant		31st	July,	,,	55.4
,,	,,		7th	August,	,,	52.6
,,	,,		14th	• • • •	,,	41.7

MEDICAL TREATMENT

Cost of Treatment

Approximate attendance cost per Cost Net Recovered Amount of Treatment Total cost 1. Dental Clinic ..

: :

*Excess of Income over expenditure

Treatment

5. Remedial Clinic ...

58 10

Eye Treatment

Ultra Violet Ray

2. Minor Ailments ...



MITOR AILMENTS CLINIC

Number of sessions held		• • •	301					
Number of cases (equal to 30.80 per								
cent. of the school attenda	ance)	• • •	878					
Number of attendances		• • •	5,878	,				
Nature of Cases.								
		1934	1935	1936				
Cleanliness—Head		118	33	18				
Body ∫ ··· ···	• • •	110))	10				
Nutrition	• • •	—	3	17				
Ringworm—Head	• • •	8	—	_				
Body		1	40	24				
Scabies		14	27	15				
Impetigo		239	410	364				
Other Diseases	• • •	1440	1021	1053				
Blepharitis		61	71	39				
Conjunctivitis		209	125	102				
Other conditions		173	100	120				
Vision	• • •	152	η 146	119				
Squint	• • •	3		6 7				
Hearing	• • •	19	2	19				
Otitis Media	• • •	73	237	403				
Other Diseases	• • •	23	17	25				
Tonsils and Adenoids	• • •	13	15	11				
Tonsils	• • •	14	17	25				
Adenoids	• • •] - a	2	2				
Other Conditions	• • •	78	141	91				
Glands	• • •	41	29	24				
Speech	• • •	4	3	1				
Teeth	• • •	20	33	24				
Heart Disease	• • •	5	6	4				
Anæmia	• • •	4	10	7				
Lungs		56	29	40				
Non-Pulmonary Tuberculosis	• • •	4	5	5				
Epilepsy	• • •	. 7	6	2				
Chorea	• • •	15	6	3				

17	24	6118
13	2	<i>k</i>
36	67	103
226	202	234
1755	1637	1825
1109	955	788
205	158	271
26	23	14
6185	5612	5878
	36 226 1755 1109 205 26	17 24 13 2 36 67 226 202 1755 1637 1109 955 205 158 26 23 6185 5612

NUTRITION CLINIC.

This Clinic is for the purpose of keeping under review children whose nutritional standard is below par and investigating the factors leading to sub-nutrition.

Attention is given to the physique and posture, state of the appetite, teeth and bowels.

Clinical defects are recorded and the Home Conditions—dieting and general hygiene of the child enquired into.

Particular attention is given to the amount of sleep, conditions of overcrowding in the bedroom.

The number of children investigated during the year was 345.

Advice given to parents is contained in the pamphlet, "Your Child at School" and "Diet for School Children," published in Annual Reports for 1933 and 1931 respectively.

EYE CLINIC.

Number of cases referred to Ophthalmic Surgeon					
Number	of	children	examined	421	
,,		,, pr	rescribed spectacles	270	
,,		,, no	ot carrying out advice	25	
11		,, re	eferred to Committee	23	

SQUINT CLASS.

During the year I recommended to your Committee the advisability of providing training for children with Squint.

Dr. Harry and myself visited the Squint Department of the Manchester Eye Hospital, where a fully equipped Squint Department is established, the equipment consisting of Synoptophore, Cheiroscope and Myoculator.

After weighing up all the circumstances it was decided to deal with the cases at the Health Centre as follows:—

- (1) To discover the cases early in the pre-school stage when the symptoms are slight, and to provide correcting lenses in these cases.
- (2) In moderate cases to provide correction by refraction, carry out fusion training by means of the Worth-Black Amblyoscope, and to apply Occlusion of the fixing eye.
- (3) In severe cases to refer these to the Manchester Eye Hospital.

During the year 25 cases have been under treatment. Three Amblyoscopes are in use and the children attend twice weekly for training.

OPHTHALMIC SURGEON'S REPORT.

During the year 421 school children were examined for various eye defects. 75 per cent. suffered from some form of hypermetropia or hypermetropic astigmatism. The remaining 25 per cent. had myopia with and without astigmatism. Of the first named group nearly a hundred cases showed evidences of ocular imbalance or squint. During

the year a special clinic was started for the training of these eyes. Briefly the routine consists of eliciting the parent's co-operation by explaining the great advantages of binocular vision and by pointing out that a child with any form of squint will grow up a one-eyed man even though his eyes are apparently straight, and as such his liability to accidents will be greatly increased. Parents are recommended to seek advice for their children as early as possible as in 60 per cent. of these cases the condition is completely cured by the wearing of correcting glasses, no further treatment being necessary. In the remaining 40 per cent. the fixing eye has to be occluded for varying periods until the sight in the squinting eye improves; at this stage by means of various appliances, which the clinic provides, the child is trained to use both eyes together.

The results obtained have been very encouraging and cures are already over 50 per cent., due in great part to the enthusiasm and perseverance of the clinic nurses.

(Signed) Philip A. Harry, M.D., D.P.H.

DENTAL CLINIC.

The number of Treatment Sessions held dur-	
ing the year	109
" Inspection Sessions held dur-	
ing the year	17
" Children notified to attend	
for Treatment	2,188
" Children attending for Treat-	
ment	727
The Total Attendances	1,405
Nature of Treatment.	
Fillings	289
Extractions	1,480
Others (gum treatment, etc.)	102
Local Anæsthesia used (Nopaine)	1,016
See Table IV, Group V, page 211.	

To conform with the Board of Education's Scheme that every Entrant should have an initial Dental Inspection and that every child during school life should have an Annual Inspection, a Dental Session each day per week is required.

Pending consideration of a full Dental Scheme in accordance with Circular 1444 | 1 recommended as urgent that two extra sessions be held per month for Inspection. At present there is only one Inspection per month.

The want of Dental Inspection of the children in the Schools is reflecting on treatment.

The ratio at present is:-

Inspection Session	•••	•••	•••	•••	1	
Treatment Sessions			• • •		11	per month
Required:—						
Inspection Sessions	• • •	• • •			3	
Treatment Sessions					11	per month

The Dental Officer agrees with me as to the urgency of this recommendation.

This was approved by the Board pending consideration of the full scheme. More particular attention being given to conservative treatment will be possible as the result of these additional Inspections. A "Scheme of Restriction" was put into force during the year, and the following notice to parents is now issued:—

"The object of the Dental Clinic is to save the teeth and not to extract them. In order that this can be carried out children must attend when notified. Parents who refuse treatment will not be allowed to attend the Deval Clinic nor have the advantage of Dental Inspection in the Schools in the future."

SUNLIGHT CLINIC.

This Clinic is well attended. I advocate Artificial Sunlight exposure, especially during the winter months, for Under-par, Nutritional and Debilitated Children, apart from cases suffering from a definite ailment.

2 K.B.B. Mercury Vapour Lamps.

Nature of Treatment.

1	Radiant Heat Lamp. Number of sessions held 101
	Number of children attending:—
	School.
	Boys 98
	Girls 95
	Number of Treatments 3,865
Nature	of Cases.
	Nutritional. Delicate. Orthopædic. General.
	16 54 31 92
T	hese included:—
	Defective Nutrition 13
	Not Thriving 8
	Skin.
	Impetigo 2
	Other Diseases (Eczema, Alopsecia,
	Psoriasis) 14
	Eye.
	Blepharitis 1
	Other Eye 4
	Squint !

Ear.		
Otitis Media		11
Nose and Throat.		
Tonsils		1
Tonsils and Adenoids	s	1
Other Conditions		7
Enlarged Glands		14
Speech		1
Anæmia		8
Bronchitis		10
Asthma		3
Non-Pulmonary T.B		
Contact T.B		
Nervous.		
Chorea		3
Other Conditions		18
Deformities.		
Rickets		5
Other Deformities		14
Other Defects		25
Infantile Paralysis		2
Rheumatism		10
Post Infection		17

In addition there were 764 attendances of pre-school children.

REMEDIAL CLINIC.

Orthopædic Consultant: Mr. H. Platt, F.R.C.S., and Staff.

Remedial Clinic: At Middleton Health Centre.

Institutional Treatment:

Short Stay and Operation Cases—Manchester Royal Infirmary (Orthopædic Department).

Long Stay Cases for whom Educational Facilities are provided—Shropshire Orthopædic Hospital.

Provision was made during the year for a fourth session if required. So far it has been found convenient to carry on with three sessions.

No cases have been sent to the Oswestry Orthopædic Hospital.

The charge per week for children admitted is £2 9s. 0d.

Two Orthopædic Nurses are engaged part-time (Miss Lee has charge of the Monday and Friday sessions, and Miss MacGill the Wednesday session).

The number of sessions held during the year was 100, and Reviews of the cases by the Orthopædic Surgeon took place on the following dates: 9 3 '36; 1 7 '36; 9 11 '36.

Number of children on Register	 129
Pre-School	 37
School	 92
Number of Attendances	 2,629
Number referred to Hospital	 5
Number provided with Apparatus	 1

The Crippled Children's Aid Society has kindly provided the apparatus required by the children.

Details of Cases at 31st December, 1936.

Age-gr	oup:	1-2	2-3	3-4	4-5	5-6	6-7	7-8
Boys		8	5	2	5	1	3	7
Girls		3	5	5	4	3	0	4
A ~~ ~~		0.0	0.10	10.11			2 12	12 14
Age-gr	oup:	8-9	9-10	10-11	11-1	2 1	2-13	13-14
Boys	oup:	8-9	9-10 8	6	11-1 5	2 1	10	8

ge-groups:	lnfa	ntile		Other		
	Para	lysis.	Rickets.	T.B. C	onditions.	
Boys:						
Child Welfare		_	12	_	8	
Entrants		_	6		5	
Intermediates		1 .	4	_	22	
Leavers		_	2	_	16	
Girls:						
Child Welfare	• • •	2	11	_	4	
Entrants		_	3	_	4	
Intermediates		2	1	_	11	
Leavers	• • •	1	1		13	
Total, 12	9.					

The number of children under school age attending is 37, and the total number of attendances 346.

TONSIL AND ADENOID OPERATIONS.

Referred to Hospital or to own Doctor	 19
Number of Tonsil and Adenoid Operations	 19

No expenditure was incurred for these cases during the year.

EAR DISEASES.

Expert Treatment in Ear Cases which may result in Deafness is advocated in Circular 1444.

No special arrangement exists for dealing with these cases beyond referring particular cases to the Manchester Ear Hospital, dealing with Tonsil and Adenoid conditions by operation and by applying local treatment at the Minor Ailments Clinic.

l approached the Medical Officer in charge, Marland Hospital, on this matter, who informed me in regard to cases in the Fever Hospital, that the present arrangement is that the Ear, Nose and Throat Specialist in connection with the Tuberculosis Service visits Marland when necessary, but that a more complete Scheme may be considered at an early date.

RINGWORM X-RAY TREATMENT.

Hospital provision is made for X-ray treatment.

No cases were referred to hospital during the year.

The cost for hospital treatment is one guinea per case.

TUBERCULOSIS.—ON T.B. REGISTER.

New cases notified during the year	3
Old cases remaining	9
Number of children on the Active List (T.B.	
Lungs)	1
,, ,, ,, Quiescent List	—
Children suffering from other forms of T.B.	11
At School	9
Not at School	_
In Institution	3

Ten children were referred to the T.B. Dispensary during the year.

OPEN AIR EDUCATION

Greater opportunities are now available for open air classes with the reconstruction of several of the schools, and the building of the new schools.

Classes are held in the open air in summer weather.

There are too many closed windows in the ordinary classrooms, and a stuffy atmosphere is evident in some of them.

The extent to which windows can be opened is not sufficient in many of the schools.

P'YSICAL TRAINING

The teachers follow the Syllabus of Physical Training but there is no Physical Training Organiser.

Organized games are controlled by the Schools Athletic Association.

Suitable clothing and footgear are required for children when undergoing Physical Training.

The Playing Fields require Dressing Accommodation with hot water laid on, and Foot and Shower Baths.

l understand the whole subject of Physical Training will come under consideration in accordance with Circular 1444 when the Organization of the Schools is dealt with.

The Staff required for this area is one part-time Male and one part-time Female Organizer.

Close co-operation with the County Authority is suggested—the same Organizer supervising an area including all schools under County and Non-County Authorities in that area.

PROVISION OF MEALS.

MID-DAY MEALS

Dinners were instituted for underfed children during the year in accordance with Circular 1443.

47 children were selected on a Nutritional basis.

The Assembly Hall was engaged where there is ample table room accommodation, with wash-basins and lavatories attached.

The Caterer provides the Meals approved by me. The Meals are prepared at his premises and conveyed to the Kitchen at the Assembly Hall and served by him. The children are supervised and instructed in food and table habits.

The following rules are posted in the room and fe children commit them to memory.

RULES FOR EATING

- 1.—Wash your hands before sitting at the table.
- 2.—Eat slowly.
- 3.—Chew your food well.
- 4.—Don't drink with each mouthful.
- 5.—Rinse your teeth after the meal.

The demeanour of the children at first was in many cases listless, refusing particular foods and showing not good appetites.

Now they are lively, eat better, ask for second helpings and sing at the end of the Meal.

The general appearance of the children is improved.

The following is a sample of the catering for one week:—

Monday.

- 1. Sea Pie.
- 2. Milk Pudding.
- 3. Raw Prunes and Raisins.

Tuesday.

- 1. Lancashire Hot Pot.
- 2. Currant Pudding.
- 3. Nuts and Apple.

Wednesday.

- 1. Steak Pie (Liver, Kidney, Mutton and Dumplings) with Jacket Potatoes.
- 2. Milk Pudding with Baked Apple.
- 3. Nuts and Dates.

Thursday.

- 1. Scotch Broth (Marrow Bones, Heart, Brain, Tripe, Carrots, Turnips, Peas).
- 2. Raisin Pudding.
- 3. Nuts and Apple.

Friday.

- 1. Steamed Cod in Milk; Jacket Potatoes.
- 2. Date Sponge Pudding.
- 3. Apple.

The diet is varied each week.

SCHOOL MILK.

The milk contracted for is pure fresh milk, not more than 24 hours old. It is pasteurized and approved by the Marketing Board. It is supplied in $\frac{1}{3}$ pint bottles with disc caps, and delivered daily at 9-0 to 10-0 a.m. to the schools.

The Milk is taken by the children through sterilized straws.

Several requests have been received during the year from Head Mistresses of Infant Departments to have the Milk delivered warm.

As the Milk supplied is Pasteurized Milk, and having regard to the provisions of the Milk and Dairies Order, 1926, it is not possible for the Contractor to supply the Milk other than in strict accordance with the Milk and Dairies Order, but no objection is raised to taking the chill off the milk immediately before use by placing the bottles in a pan of warm water, or near a fire, or on hot pipes.

It was pointed out that the Milk should be sipped slowly through the straw in all cases. .

Number of individual children fed (free) Number of milk meals provided (free)	637
Number of milk meals provided (free)	97,503
Cost per ration (food)	$1\frac{1}{4}d$.
Cost per ration (milk)	$\frac{1}{2}$ d.
Total cost per meal	1 ¾ d.
School Feeding. (Payment at Schools include	d)
Total 248,800 meals (approx	imate.)

Drinking Straws for School Milk.

The safety of these straws depends on their freedom from contamination.

A sample was submitted for Bacteriological examination during the year, with the following results:—

"No harmful bacteria were found. B. coli and haemolytic streptococci were absent in the specimens submitted. A total count of 96 organisms per straw was obtained. There was no evidence of fungoid growth."

I am informed by the Contractor that:-

"Control tests for Sterility of the Straws supplied to the Schools are carried out regularly in our Laboratory.

These tests have always proved satisfactory.

Our straws are purchased in million lots, and before putting them into use, tests are made and continued at intervals during the time of consumption.

The straws we are at present using are of German origin and are supplied to us with a Certificate of Hygiene. We understand that they are chemically bleached and guaranteed perfectly sterile.

With regard to natural straws of British Manufacture, we find that there is not a supply available."

the Schools in sealed packets.

SEASIDE CONVALESCENCE

- 150 children were sent to Rossall by the Mayor's Holiday Camp Fund Committee, for one week in each case.
 - 78 children were sent to Lytham during the year. The period was 2 weeks in each case.
 - 22 were sent to the Children's Sanatorium, Southport.-

13 to the Stelfox Cot and 9 to the Jubilee Cot. The second Bed (Jubilee Cot) was endowed during the year at a cost of £500, the amount being raised by public subscription to commemorate the Jubilee of the Inception of the Borough.

The Mayoress of the year (Mrs. Kay) especially identified herself in the effort.

The Head Teacher, St. Gabriel's School, organized a Camp Holiday for the children at his school at Conway and 53 children attended during the year.

SCHOOL BATHS.

There are no baths nor sprays in connection with the school buildings, and recourse is made to the use of the Public Baths.

The total number of attendances of school children to the Baths during the year was 18,884. Of these 7,562 were made under Swimming Instruction.

School Swimming Lessons:-



		Boys.	Girls
No. of Sessions held		133	130
Certificates granted—1 Length		96	110
Certificates granted—1 Mile		52	35
Free Passes awarded	• • •	52	35
Total Attendances		7,56	2

CO-OPERATION.

Co-operation with Parents, Teachers, School Attendance Officer, General Practitioners and Tuberculosis Officer is maintained as explained in last year's Report.

The percentage of attendances of parents at Inspections was as follows:—

Entrants.	Intermediates.	Leavers.	Others.
83.14%	58.17%	35.50%	41.18%

VOLUNTARY ASSOCIATIONS.

The Cripple Children's Help Society (Middleton Auxiliary) during the year dealt with 5 children in the Convalescent Farm, Mellor and 8 at the Marple Home.

5 Spinal Carriages, | Merlin Chair, 2 Alwyn Chairs and | Self-propelling Chair were in use during the year.

The N.S.P.C.C. dealt with 26 cases.

The Mayor's Clog Fund assisted necessitous cases.

EXCEPTIONAL CHILDREN.

1. Partially Sighted Children.

i.e., Children who though they cannot read ordinary school books, or cannot read them without injury to their

eye ght, have such power of vision that they can appropriately be taught in a school for the partially sighted.

- 6 Children are included under this heading.
- 3 are in the ordinary school—
 3 girls (ages 7, 8 and 10 years).

I case (girl, aged 15 years) is in Henshaw's Institution for the Blind, and I case (boy, aged 9) attends Oldham Blind School.

I boy aged 14 years has now left school and is working.

2. Deaf Children.

i.e., A child who is too deaf to be taught in a class of hearing children in an elementary school.

I boy (aged 13 years), attending Gower Street School for the Deaf, Oldham is a case of Nerve Deafness, which is incurable.

3. Partially Deaf Children.

i.e., Children who can appropriately be taught in a school for the partially deaf.

9 of these children are in the ordinary schools.

				Ages.		
				Years.		
		7-8	9-10	11-12	12-13	13-14
Boys Girls	• • •		1	2 .	. 1	
Girls	• • •	2		1	_	2

4. Mentally Defective Children.



Mentally Defective Children are children who, not being imbecile and not being merely dull or backward, are incapable, by reason of mental defect, of receiving proper benefit from the instruction in the ordinary Public Elementary Schools, but are not incapable, by reason of that defect, of receiving benefit from instruction in Special Schools for mentally defective children.

There is a total of 13.

M.D. Cases.

During the year a review of all M.D. Cases was made in accordance with Memo. 151 (Board of Education).

Children who are Imbeciles or Idiots are in Institutions or at home, and have been notified to the Certifying Authority at various dates.

In certain cases the parents have refused to accept Institutional Treatment, and in others who have accepted treatment some are waiting admission to an Institution.

The Ascertainment of the M.D. Educable Child has been made in most cases in the pre-school stage, either when the child attended the Welfare Centres, or in the homes by the Health Visitors. In the latter case an effort is made in each case to get the mother to attend with the child for examination.

There is no special provision in the Schools for these cases. Those children at School are in the ordinary classes.

There is no After-Care of these children when they leave school, but when they attain the age of 16 the case is brought to the notice of the M.D. Authority for the purpose of supervision, and to obtain training in such cases.

Ag Group.

Years

	6-7	9-10	10-11	11-12	12-13	13-14	15-16
Males	_	1		_	2	1	2
Females .	1	1			1	1	3

There were no children certified under the M.D. Act during the year.

Of the total, 13,

4 are at school 2 boys and 2 girls.

2 are over school age ... 2 boys.

4 are at home 1 boy and 3 girls.

3 in Institutions 1 in the Royal Albert Institution, Lancaster.

1 in Dogford Homes, Royton.

1 in M.D. School, Swinton.

5 of the 13 cases have multiple Defects:-Feebleminded and Girl age 15 ... At home. Epilepsy Feebleminded and Boy age 9 ... At school. Epilepsy Feebleminded and Hydrocephalic Girl age 13 ... At home. Feebleminded and Girl age 15 ... In Institution, Infantile Paraly-Royal Albert sis †Imbecile & Rickets ... Boy age 12 ... At home. †1 Case certified to the Mental Deficiency Act Committee.

EPILEPTIC CHILDREN.

I child (boy, age 7) was admitted to Much Hadham Special School for Epileptics during the year.

In addition, there are 2 children Feebleminded with Epilepsy, as shewn above.

PHYSICALLY DEFECTIVE CHILDREN.



Are children who, by reason of physical defect, are incapable of receiving proper benefit from the instruction in the ordinary Public Elementary Schools, but are not incapable, by reason of that defect, of receiving benefit from instruction in Special Schools for physically defective children.

The Board issues special instructions with regard to tabulating the various categories and in accordance with these directions only children who are incapable of receiving proper benefit from instruction in the ordinary school are included.

These children are classified under 4 Groups.

A. TUBERCULOUS CHILDREN.

i.e., Only cases diagnosed as tuberculous and requiring treatment for tuberculosis at a sanatorium, a dispensary, or elsewhere.

- 1. Pulmonary | girl aged 5 years, in Institution.
- 2. Non-Pulmonary ... 3 boys and 2 girls.

Ages—Boys: 6, 10, 11 years.
Girls: 7, 11 years.

3 at School; 3 in Institution.

Conditions.

Glands 3 at school.

Hip I in institution.

Peritoneum ... I in institution.

These children are under treatment.

On Tuberculosis Register, 12 (see page 176).

B DELICATE CHILDREN.

Nature of		At	Not at	in
Case.		School.	School.	Institution.
Bad Nutrition	• • •	2		
Rheumatism		29	· —	
Mastoid	• • •	1		_
Heart?	• • •	17		
Asthma		5	—	
Other Delicate		16	1	

Ages

		-						I c	otal
5-6	6-7	7-8	8-9	9-10	10-11	11-12	12-13	13-14	
Boys 2	3	1	2	5	2	5	3	9	32
Girls 1	—	3	4	7	5	7	6	6	39

lncluded also in this group are 6 children who have been notified T.B., but who no longer require treatment, and in addition I case on the Tuberculosis Register of another Authority, but attending school in this district.

C. CRIPPLED CHILDREN.

These include children who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life, i.e., children who, generally speaking, are unable to take part, in any complete sense in physical exercises or games, or such activities of the school curriculum as gardening, or forms of handwork usually engaged in by other children.

A total of 45 children are returned under this heading:—

43 at School 2 in institution Ages

_									——Та	otal
	5-6	6-7	7-8	8 9	9-10	10-11	11-12	12-13	13-14	
Boys	s I	3	5	3	4	3	1	4	1	25
Girl	s I	1	1	2	3	4	3 *	3	2	20

D. CHILDREN WITH HEART DISEASE.



The Heart condition is so severe as to necessitate the provision of educational facilities other than those of the Public Elementary School.

			Α	ges			——То	tal
Boys-							10	lai
5-6	6-7 7-8	8-9	9-10	10-11	11-12	12-13	13-14	
	I —	1			1		_	3
Girls—								2
								2

4 of these children attend School, I case, a boy aged 8 years is in an institution.

The condition of the heart in all cases shows Valvular disease or Dilatation and is rheumatic in origin.

RHEUMATISM.

Children suffering from Acute Rheumatism are treated by the General Practitioner, but if recommended for Hospital treatment the Manchester Childrens' Hospital is available.

In Convalescent Cases recommendations are made to the Southport Children's Sanatorium or the Marple Home.

Sunlight Treatment is provided for suitable cases at the Health Centre.

(See Enquiry:—"Rheumatism in School Children")
page 192.

DEATHS OF SCHOOL CHILDREN DURING THE YEAR.

	Cause.	M.	LL	4.	5-6.	6-7.	7-8.	8-9.	9-10.	10-11.	11-12.	12-13.	13-14.
	acute Hæmorrhagic		1									1	
	Diphtheria Acute Endocarditis,	_	'	_	_					_		1	
	Acute Rheumatism . Theumatoid Arthritis,		l	_	_	_	_	1		_	_		_
	Tuberculosis		1	_	_	_		1			_		_
	obar Pneumonia Spastic Diplegia	1		_	_	_	_	_	_	_	1	_	_
	Operation Pinks Disease accelerated by												
1	administration of		1		1								
	Gas & Oxygen	1	1	_		1	_	_		_	_	_	1
	aucial Diphtheria	1	_	1	_	_	<u> </u>	_	_	_	_	_	_
	Piphtheria	1		_	1	—	_	—	—	—	_	—	—
		5	6	1	2	1	2	2		_	1	1	i

CHILDREN ACT.

Nursed out children are registered up to the age of 9 years.

5 children are of school age.

EMPLOYMENT.

The Byelaws regulating the Employment of Children and Young Persons, under the Employment of Children Act and the Education Act, with regard to (a) the Employer giving Authority, (b) the issue of an 'Employment Card' by the Local Education Authority, (c) the times of Employment, (d) Certificate of School Medical Officer within 14 days of employment.

Certificates issued during the year.

Full-time. Clear. on account of Defects.

28 9 19

Part-Time. Granted. Not Granted.

Employment of Children in Entertainments.—Rules, 1920.

No. of Certificates issued 10

JUVENILE ADVISORY COMMITTEE.

The Secretary of the Juvenile Advisory Committee kindly supplied the following information:—

GIRLS.

Occupations.

Normal—Apprentice hairdressers, cotton operatives (back tenters, ring doffers, winders, creelers, reachers-over, roller coverers), dyeing and bleaching (making-up room assistant, stringers, plaiters, etc.), knitting machinists, under-clothing machinists, resident domestic servants, daily domestic servants, laundry workers, clerical workers, preserves works assistants, apprentice confectioners, factory workers, electrical workers, shop assistants, silk winders, silk weavers.

The following workers are unsuitable for:—

- Severe manual work—Cotton winder, making-up room assistants, silk winders, clerical workers, ring doffer.
- Work exposed to bad weather—Cotton winders, makingup room assistants, ring doffers, silk winders.

W' k in dusty atmosphere—Clerical workers, making-up room assistants.

Prolonged standing-Cotton winder, silk winder.

Eye strain—Cotton winders.

Acute distant vision—Making-up room assistants, cotton winders, electrical goods assemblers, etc., creelers.

Acute hearing—Making-up room assistants, machinists, back tenters.

BOYS.

Occupations.

Normal—Apprentice bricklayers, apprentice painters, apprentice fitters, dyeing, bleaching and finishing (plaiters, sweepers, making-up room assistants, etc.), clerical workers, apprentice electricians, cotton mill operatives (little piecers, tubers, doffers, warehouse assistants, reachers-over, cotton feeders, etc.), laundry workers, errand boys, apprentice plumbers, factory workers, apprentice joiners, leather workers, shop assistants, apprentice upholsterers.

The following workers are unsuitable for:-

Severe Manual Work—Milk boys, packers, office boys, errand boys.

Work exposed to bad weather—Apprentice upholsterers.

Work in dusty atmosphere—Office boy.

Eye strain—Farm workers, packers, errand boys, plaiters.

Acute distant vision—Errand boys, farm workers, packers, tubers, plaiters.

Acute hearing—Apprentice painter, plaiter, warehouse assistant.

ENQUIRY.

RHEUMATISM IN SCHOOL CHILDREN.

1. Discovery of Cases.

The three principal sources through which Rheumatism in children is discovered are (a) Absenteeism—When a child is absent from School the child is reported on the School Absentee List to the Clinic and Followed-up by the School Nurse. A report is made of the nature of the illness, if receiving Medical attention and so forth. The child is examined at the Clinic in the presence of the parent before returning to School and full particulars obtained of the history of the case and the Doctor communicated with if necessary.

- (b) The child may be brought by the parent to the Clinic for consultation for the Rheumatic condition, or the child may attend for other Ailment when a Rheumatic manifestation may be found on examination.
- (c) At Routine and Special Medical Inspection in the Schools. In some of these cases a Heart lesion has been found of which the parent has had no previous knowledge.

2. Diagnosis.

The history in each case is fully considered, the child is medically examined and all defects noted. The condition of the heart is recorded, pulse rate taken at rest and after exertion, and a search made for any present or previous focus of infection which is (was) likely to lead to streptococcic infection.

3. Review of the Cases.

23 Boys and 25 Girls have been reviewed. The conditions found were:—

Post Rheumatic Fever	in			 4	cases
Chorea	in			 3	,,
Muscular Twitching				4	,,
Pain (joints and fibre	ous tiss	sues)	in	 4	,,
Nervous	in			17	,,
Stammering				- 1	case
Night Frights					cases
Restless Sleep					,,
Excitable and Emotio					,,
Debilitated, Malaise,				2	,,
Neuritis (with paresis				2	,,
Nodules (skin)	in			 1	case

One or more than one of these conditions were found in each case examined.

Condition of the Heart.

31 of the children reviewed were found to have Rheumatic heart lesions.

There was V.D.H. in 19 cases—one of these 'Severe,' ? V.D.H. in 6 cases, Irregular action of the heart in 2 cases, Tachycardia in 1 case, Dilated heart in 3 cases.

Some of these children have been under Medical attention for Rheumatism, other cases have been discovered at Medical Inspection where there has been no previous Medical attention. In the 'Severe' case there is a history of Otitis Media, post Diphtheria and pains in the legs. In one there is a history of Rheumatic Fever, Otitis Media, Post Tonsil and Adenoid Operation, with Measles, Whooping Cough and Mumps.

There were Nose and Throat defects in 14 and Ear defects in 4.

Nervous Manifestations (Chorea, Night Frights, Restless Sleep, Excitable, etc.), were noted in 13, and Blood Infection (Enlarged Glands and Anæmia) in 14. The defects were multiple in several of the cases.

4. Age Groups of Rheumatic Children.



Branch

Years	5-6	6-7	7-8	8-9	9-10	10-11	11-12	12-13	13-14
Boys Girls								_	_
	2	2	4	5	6	2	10	5	12

There is a higher incidence in the older age groups and this is more marked in girls.

Previous history of Infection in Rheumatic Children examined.

Infection.

		Whoop-				E	Bronch.
		ing	ing Scarlet				and
	Measles.	Cough.	Chpx.	Fvr.	Diph.	Pneu.	other.
Boys	19	8	13	3	I	4	2
Girls ,,	23	12	18	4	3	5	5
	42	20	31	7	4	9	7

Incidence of Previous Infection in Rheumatic Children as compared with Children examined at Routine Inspection

W/haan

	V	v noop-			Ľ	oronen.	
	Mea-	ing	S	Scarlet			and
	sles.	Cough.	Chpx.	Fvr.	Diph.	Pneu.	other.
	%	%	%	%	%	%	%
Rheumatic							
Children .	87.52	45.85	43.76	12.5	8.34	18.75	16.68
Routine							
Children .	75.82	57.37	51.11	10.45	3.55	11.82	17.

5. Nutrition and Physique of Rheumatic Children.

13 Boys and 16 Girls were considered 'Delicate' at some period of their School life.

7 Boys and 11 Girls were Underweight.

The incidence of Defects was greater in Rheumatic Children as compared with Children examined at Routine Inspections in respect of the following conditions:—

Defect.	Rheumatic.	Routine
	%	%
Ear	 18.75	3.64
Nose and Throat	 58.34	39.28
Eye	 27.08	14.92
Teeth	 89.58	61.91
Enlarged Glands	 25.00	19.36
Anæmia	 12.50	2.64
Nervous	 33.33	5.18

6. Social Conditions.

The following table gives the incidence of Damp Houses, Unemployment and Overcrowding, with the distribution for families by Wards.

Ward	I		No. of families.	_	Unemploy- ment.	Over- crowd- ing.
North			7	5	2	
Central			12	7		3
South			7	1	_	1
East			8	6	3	1
Parkfiel	ld		8	3	2	1
West	• • •	• • •	6	3	1	1
		_	48	25	8	7
Percentage.		52.10%	16.67%	14.60%		

Method of Dealing with the Cases.



(1) Medical Inspection.

These children are kept under frequent periodic review when at school. Special Inspections are made by notifying the parents to attend the Morning Clinic.

(2) If absent from School the child is followed-up and a note made (a) if receiving medical attention, (b) if attending hospital, (c) if in Institution or Convalescent Home.

(3) Rest and School Work.

Teachers are notified of the condition in each case and special instructions are given in Heart Cases as to Physical exercise and strain of Mental Work, Exposure, etc. Parents are advised accordingly.

(4) Hospital Treatment.

The surrounding Hospitals in Manchester, Salford and Oldham admit cases by recommends from the family Doctors.

(5) Convalescent Treatment.

Admission is secured to the Children's Sanatorium, Southport, and Marple Home in special cases or otherwise through the local Hospitals Committee. Prolonged Institutional Treatment is not always available.

(6) Nutritional Treatment.

If receiving Medical attention and the child is absent from School the Mayor's Food (Sick) Fund is available in necessitous cases requiring nourishment.

- School Milk and School Meals are available for suitable cases attending School, in addition to Clinic supplies (Cod Liver Oil, Parrish's Chemical Food, Bemax, Virol, etc.).
- (7) Clinic Treatments.—The following Clinics are available according to the circumstances of the case—Dental, Remedial and Sunlight.
- (8) Parental Advice—This is based on the Pamphlet 'Your Child at School' advocating proper dieting and hygienic care in the home.
- (9) On leaving School these children are notified to the Juvenile Employment Committee and Factory Surgeon and the class of Unsuitable Employment (s) indicated under these headings noted:—

Leaver—Employment.

Unsuitable for Occupation Requiring:

Severe Manual Work.

Sedentary Occupation.

Work exposed to Bad Weather.

Work in Dusty Atmosphere.

Prolonged Standing.

Eye Strain.

Acute Distant Vision.

Acute Hearing.

(10) After-Care—There is no voluntary Organization in this Area.

SUMMARY.

The findings as far as they have been worked out in respect of these 48 children show that:—

- 1. Rheumatism in these children tends to increase with age.
- 2. Incidence of Infectious Diseases is higher in these children than in other children.
- 3. Nutrition and Physique of the children are under par in the majority and many of the children have been of the Delicate type.
- 4. Physical defects are in excess in respect of Decayed Teeth, Ear, Nose and Throat conditions, Enlarged Glands and Anæmia, Nervous Conditions.
- 5. The Housing conditions are significant. 52% of the houses show Dampness. 3 of the families are overcrowded under the Overcrowding Regulation and a further 4 families are congested. ? Overcrowding, or nearly 15% in all. Unemployment amounted to nearly 17%.
- 6. No relation has been made out between the houses and the river courses in the area, nor to the level of ground water.
- 7. The onset of the heart affection in some of the children has been insiduous and has not come to notice until routine medical inspection had been carried out. The cases which had an acute attack of Rheumatism were under 1%. The majority of the children are of a nervous and emotional type.
- 8. Constant supervision and prolonged after care are required for these children.

S. T. BEGGS.

BOARD OF EDUCATION TABLES.

TABLE I.—RETURN OF MEDICAL INSPECTIONS. A ROUTINE MEDICAL INSPECTIONS

Number of Prescribed Group Inspections:— Entrants Second Age Group Third Age Group	224
	1,083
Number of other Routine Inspections	. 17
Grand Total	. 1,100
B. OTHER INSPECTIONS.	
Number of Special Inspections	. ,
Number of Re-inspections	1,240
Total	. 2,910

C. CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual children found at Routine Medical Inspection to Require Treatment (excluding Uncleanliness and Dental Diseases).

(1) (2) (3) (4) Entrants 3 65 67 Second Age Group 19 58 74 Third Age Group 18 68 77	Group.	For defective vision (excluding squint)	for all other conditions recorded in Table II A.	Total.
Second Age Group 19 58 74 Third Age Group 18 68 77 Total (Prescribed Groups) 40 191 218 Other Routine Inspections 1 1 2			(3) 65	(4) 67
Total (Prescribed Groups) 40 191 218 Other Routine Inspections 1 2	Second Age Group		58	74
Constant	Total (Prescribed Groups)			218
Grand Total 41 · 192 220				2
	Grand Total	41 -	192	220

TABLE 2.

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1936.

		outine ections.		Special Inspections.		
Defect or Disease.	Z o	Requiring to be kept a under observation, but a not requiring treatment.	ttment.	Requiring to be kept and under observation, but and requiring treatment.		
(1)	(2)	(3)	(4)	(5)		
Skin. Ringworm: Scalp Body Scabies Impetigo Other Diseases (N Tuberculous)				_ _ _ 4		
Eye. Blepharitis Conjunctivitis Keratitis Corneal Opacities Other Conditions Defective Vision cluding Squint Squint	8 (ex-	55	9 26 — 20 82 20	53		

TABLE 2.—Continued.

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1936.

		utine ections.	Special Inspections.		
_	No. of	Defects.	No. of Defects		
Defect or Disease.	7 Requiring treatment.	Requiring to be kept sunder observation, but not requiring treatment.	A Requiring treatment.	Requiring to be kept on under observation, but not requiring treatment.	
Ear Defective Hearing	5	12	17	5	
Otitis Media Other Ear Diseas	16	2	35	į	
		2	4		
Nose Chronic Tonsillitis of and Adenoids only	only 82	256 3	33 1	74	
Throat Chronic Tonsilli	•		•		
and Adenoids			9		
Other Conditions	12	78	73	18	
Enlarged Cervical Gland (non-Tuberculo		213	2.4	£ 2	
Defective Speech	•	13	24	52 7	
Heart Heart Disease:					
and Organic	7	6	9	5	
circula- Functional	—	9		6	
tion Anaemia	3	26	8	30	

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1936.

		outine ections.		ecial ections.
	No. of	Defects.	No. of	
Defect or Disease.	S Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment
(1)		(3)	(4)	(5)
Lungs Bronchitis Other non-Tuberc	6	25	29	7
ous Diseases	2	2		_
Tuber- Pulmonary: culosis Definite Suspected		_1	_	
Non-Pulmonary : Glands		2	1	5
Bones and Joi	nts —		—	_
Skin Other Forms	—			2
Nervous Epilepsy	—	3		2 3
System Chorea Other Conditio	ns 9	45	3 22	11
Defor- Rickets	2	4	14	1
mities Spinal Curvature Other Forms	ns 9 2 e 2 23	118	6 79	73
Other Defects & Disea	ses			
(excluding Uncleanlin and Dental Diseases		225	118	79
Total	298	1,136	831	453

B. CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

No. o Age-groups. chil	of (Exc d-	A ellent)			Sligl	C ntly mal)		D ad)
	ed No.	%	No.	%	No.	%	No.	%
Entrants 37	9 94	24.8	192	50.6	93	24.6		_
Second age- group 38	0 114	30.0	155	40.8	110	28.9	i	.3
Third age- group 32	4 101	31.2	135	41.7	87	26.8	١	.3
Other routine inspections 1	7 8	47.1	5	29.4	4	23.5		
Total 1,10	0 317	28.8	487	44.3	294	26.7	2	.2

TABLE 3.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

BLIND CHILDREN. At Certified Schools for the Blind At Public Elementary Schools ... At other Institutions At no School or Institution Total ... PARTIALLY SIGHTED CHILDREN At Certified Schools for the Blind ... At Certified Schools for the Partially Sighted At Public Elementary Schools ... At other Institutions At no School or Institution Total ... 6 DEAF CHILDREN. At Certified Schools for the Deaf At Public Elementary Schools ... At other Institutions At no School or Institution Total ... 1

PARTIALLY DEAF CHILDREN. At Certified Schools for the Deaf At Certified Schools for the Partially Deaf At Public Elementary Schools ... At other Institutions At no School or Institution Total ... 9 MENTALLY DEFECTIVE CHILDREN Feeble-minded Children At Certified Schools for Mentally Defective Children At Public Elementary Schools ... At other Institutions At no School or Institution Total ... 7 In addition to these are cases showing Multiple Defects as recorded at end of table. EPILEPTIC CHILDREN. Children Suffering from Severe Epilepsy. At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution

Total

PHYSICALLY DEFECTIVE CHILDREN.



A. Tuberculous Children.

I.—Children Suffering from I		-			sis.
At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution		•••	• • •		 - -
	Total	• • •	•••		1
II.—Children Suffering from No	n-Pulr	nona	ry T	ubercu	ılosis
(This category should include other than those shown in I. about		erculo	sis (of all	site
At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution					3 2
	Total	• • •		···	5
B.—Delicate	Childr	en.			
At Certified Special Schools At Public Elementary Schools At other Institutions At no School or Institution		•••	•••		70 - 1
	Т. ь. 1				71

C.—Crippled Children.	
At Certified Special Schools	- 43 2 -
Total	45
D.—Children with Heart Disease.	
At Certified Special Schools	 4 1 5
CHILDREN SUFFERING FROM MULTIPLE DEFECTS.	E
Combination Certified Elemen- other School or of Defect. Special tary Institu- Schools. Schools. Feebleminded &	Total
Epilepsy — 1 (boy) — 1 (girl)	2
Feebleminded & Hydrocephalic — — — 1 (girl) Feebleminded &	1
Infantile Paralysis — — 1 (girl) — Imbecile &	1

Rickets

. 1 (boy) 1

TABLE 4.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER, 1936. TREATMENT TABLE.

GROUP I. MINOR AILMENTS (excluding Uncleanliness).

	Nι	Number of Defects treated, or under treatment during the year.			
Disease or Defect.	Under the Authority's Otherwise Total. Scheme.				
(1)		(2)	(3)	(4)	
Skin-					
Ringworm-Scalp—					
(i.) X-Ray Treatment		_	_		
(ii.) Other "	• • •	—	_		
Ringworm-Body	• • •	2	_	2	
Scabies	• • •	5	_	5	
Impetigo	• • •	66	_	66	
Other Skin Disease		220	_	220	
Minor Eye Defects—					
(External and other)		73	_	73	
Minor Ear Defects	• • •	59	_	59	
Miscellaneous—					
(e.g., minor injuries, bruises,					
sores, chilblains, etc.)	• • •	453		453	
Total	• • •	878		878	

GROUP 2. DEFECTIVE VISION AND SQUINT.

(excluding Minor Eye Defects treated as Minor Ailments)

	ents)		
(Group I.).	Number of	Defects	dealt with
•	Under th Authority Scheme	s Otherw	ise Total.
Errors of Refraction (included squint). Operations squint should be record separately in the body of Report)	for led the 421 the	2	423
corded in Group I)			_
Total	421	2	423
	Under the Authority' Scheme.	s Otherwi	se Total.
No. of Children for who	om		
(a) Prescribed	270 245	2 4	272 249
GROUP 3. TREATMI NOSE AND	ENT OF DE THROAT	EFECTS (OF
Number o	f Defects.		
Received Operative Treatme	ent.		
Under the By Private Authority's Practitioner Scheme in or Hospital, Clinic or apart from Hospital. the Authority's Scheme.	otal. for		Total number treated.
(1) (2) (3) (4	ł)	(5)
(iii) 19 (iii)		_	19
(i) Tonsils only; (iii)	Tonsils and	Adenoids	

GROUP 4.—ORTHOPÆDIC AND POSTURAL DEFECTS.

			Unde	r the A	uthori (1)	ty's So	cheme.
				esident thopæd			
Number of ch	nildren t	reate	d Other (2		132		
tr	esidential eatment with education	trea wit	tment thout	trea a ortho	reside atment t an opædio inic.	n tr	Total umber eated.
	(i)		(ii)		iii)		
Number of chi treated *These 8	cases at	tende ho	spitals.	out-pati		t vari	
GROUP 5.	DENTA	AL IN	NSPEC	TION	& TRI	EATN	IENT.
(1) Number	of childre	en ins	spected	by the	Dent	ist	
(a) Routin	-	oups 5	6	7	8	9	
Number	r 30	98	134	173	60	30	
	Age	10	11	12	13	14	Total
Nı	umber	34	90	139	97	2	887
(1.) S:	Je						61
(b) Specia	113						

GROUP 5. DENTAL DEFECTS.—Continued.

(2)	Number found to require treatment	• • •	736
(3)	Number actually treated	• • •	727
	Children re-treated	•••	292
(4)	Attendances made by children for treatment	•••	1,405
(5)	Half-days devoted to		
	Inspection 17 Total	•••	126
(6)	Fillings:		
	Permanent teeth 248 Total Temporary teeth 41	• • •	289
(7)	Extractions:		
	Permanent teeth 322 Total Temporary teeth 1,158	•••	1,480
(8)	Administrations of local anaesthetics extractions		
(9)	Other Operations:		
	Permanent teeth 100 Temporary teeth 2	• • •	102

GROUP 6. UNCLEANLINESS & VERMINOUS CONDITIONS.

1.	Average number of visits per school made during the year by the School Nurses 7.65
2.	Total number of examinations of children in the Schools by School Nurses 10,924
	Number of individual children found unclean 238
4.	Number of children cleansed under arrangements made by the Local Education Authority 2
5.	Number of cases in which legal proceedings were taken:
	(a) Under the Education Act, 1921 Nil

(b) Under School Attendance Byelaws Nil



